

Health Survey in Montgomery County, MD, 2022

A Survey on Health Status and Behaviors



Montgomery County, Maryland
Department of Health and Human Services
Public Health Services
Health Planning and Epidemiology

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EXECUTIVE SUMMARY

Although Montgomery County performs better than state and national averages on most health outcomes and health factors, findings from this health survey identified great variations among population subgroups and communities within the County. The disparities by race/ethnicity, age, sex, and geographic area warrant special attention. It is critical to highlight these areas in order to target efforts and resources to meet the evolving needs of a changing population in the County. The major findings from the health survey are summarized below.

Demographics

- (1) The overall response rate was 15.3% (1,374/9,000), including 52.4% females and 47.6% males. 81.9% of respondents identified as non-Hispanic origin; 57.8% identified as White, followed by African American (14.8%) and Asian/Pacific Islander (13.1%).
- (2) 43.9% of survey respondents had income over \$100,000. 10% less than \$20,000.
- (3) Over half of the respondents are married (56.1%) and 28.5% of respondents are never married.
- (4) 29% of survey respondents hold postgraduate degrees, and 26.3% of survey respondents are college graduates.

Health and Health Related Priorities

- (1) Mental health (18.3%), COVID-19 (12.9%), cancer (11.0%) and overweight/obesity (11.0%) were the 3 most important health problems affecting health of County residents.
- (2) Availability/access to insurance (12.8%), housing/homelessness (10.9%), and lack of affordable childcare (9.8%) were the 3 most social/environmental factors affecting health of County residents.
- (3) Poor eating habits (17.4%), lack of exercise (17.1%), and texting/on the phone while driving (16.6%) were the 3 most important risky behaviors affecting health of a community.
- (4) Low crime/safe neighborhoods (20.9%), good schools (16.1%), and access to health care (13.0%) were the 3 most important factors making up a healthy community.

Healthcare Access

- (1) Cost (33.3%), no insurance (24.1%), and wait too long (11.7%) were the 3 most reasons not getting health care.
- (2) While there were 9.6% respondents without health insurance, men (12.8%), aged 18-34 (16.5%), Hispanics (12.5%), and Germantown/Gaithersburg/Poolesville PCSA areas (17.46%) had the most uninsured among population subgroups.
- (3) While 76.4% of respondents visited healthcare providers last year; aged 18-34 (12.3%), Hispanics (15.1%), and Germantown/Gaithersburg/Poolesville PCSA areas (10.9%) had visits 5 or more years ago among population subgroups.
- (4) While 75.9% of respondents have a PCP, aged 18-34 (52.9%), Hispanics (68.0%), and Germantown/Gaithersburg/Poolesville PCSA areas (29.0%) were least likely to have PCPs among population subgroups.

Impacted from COVID-19

- (1) 52.3% of respondents indicated a family member or friend outside their household has been diagnosed with COVID-19.
- (2) 15.7% reported that they have never received the flu vaccine overall; aged 35 to 64 (18.6%), Hispanics (19.5%), and Olney/Damascus PCSA areas (23.4%) were highest among population subgroups.
- (3) 14% reported that their finances were severely impacted by the COVID-19 pandemic; 5.1% reported for food supply, 12.4% for job or wage loss, 5.6% for housing, 6.9% for physical health, 15.1% for mental health, 6.6% for childcare, 44.9% for travel plans or vacations, 27.2% for social relationships, 15.1% for death of family member or friends, and 19.1% for not participating in outdoor recreational activities.
- (4) 8.4% reported needing healthcare assistance as a result of COVID-19; 12.8% reported for financial assistance, 6.0% for energy assistance (utilities), 9.3% for food assistance, 5.0% for Wi-Fi/internet assistance, 2.7% for housing/shelter, 1.4% for translation/interpretation services, 3.7% for childcare assistance, and 8.3% for rental/mortgage assistance.
- (5) 0.6% respondents indicated they are not interested in COVID-19 testing; women (0.8%), aged 35-64 and 65+ (0.7%), NH-Blacks (1.3%), and Olney/Damascus PCSA areas (0.89%) were mostly not interested in COVID-19 testing among population subgroups.

Health Status and Health Related Behaviors

- (1) 23.5% respondents reported not participating in any physical activity; women (28.1%), aged 65+ (30.5%), Hispanics (40.1%), and Germantown/Gaithersburg/Poolesville PCSA areas (36.7%) were least likely participating in physical activities among population subgroups.
- (2) 61.6% respondents reported at least one drink alcoholic beverage in the past 30 days; men (67.3%), aged 35-64 (31.9%), NH-Whites (34.1%) were mostly having alcohol beverage among population subgroups.
- (3) 7.6% respondents reported never having blood cholesterol checked; men (8.8%), aged 18-34 (15.7%), Asians (13.6%), and Rockville/Washington PCSA areas (8.5%) were least likely to have blood cholesterol checked among population subgroups.
- (4) 25.7% reported that a doctor or health provider have told them that they have a depressive disorder; 21.7% reported for arthritis, 15.9% for diabetes, 11.7% for asthma, 11.2% for cancer, 3.8% for angina or coronary heart disease, 3.8% for heart attack or stroke, 3.3% for chronic obstructive pulmonary disease, and 2.9% for kidney disease.
- (5) 10.4% respondents had last dental visit 5 or more years ago; men (2.3%), aged 18-34 (2.8%), NH-Blacks (8.3%), and Silver Spring/Takoma Park PCSA areas (5.6%) mostly never visited a dentist among population subgroups.
- (6) 2.6% respondents reported that they smoke everyday; men (3.1%), aged 35-64 (3.5%), NH-Blacks (5.6%), and Silver Spring/Takoma Park PCSA areas (4.8%) had the highest smoking everyday among population subgroups.
- (7) 10.2% respondents reported e-cigarette/vaping use; men (13.3%), aged 18-34 (16.3%), NH-Whites (14.2%), and Silver Spring/Takoma Park PCSA areas (13.5%) had most reported use among population subgroups.

INTRODUCTION

Montgomery County is the most populous county in Maryland with a population estimate of more than 1.05 million in 2019 from the U.S. Census. It would be the 10th most populous city in the U.S. if it were a city. Montgomery County is one of the most affluent counties in the country [1] and has the highest percentage (31.4%) of residents over 25 years of age who hold post-graduate degrees. In 2011, Montgomery County was ranked by *Forbes* as the 10th richest in the country, with a median household income of \$92,213 [2] that has grown to \$108,820 between 2015 and 2019. Montgomery County has a very diverse population and there is an increasing trend towards becoming more diverse over time. In 2019, there were 44.2% Non-Hispanic Whites, 19.4% Non-Hispanic Blacks, 16.1% Asians/Pacific Islanders, and 20% Hispanics or Latinos based on the estimate from U.S. Census. Of the County's population, 32.5% were born outside the U.S.

Montgomery County has had the highest overall health outcomes ranking in Maryland since 2014, based on the County Health Rankings by the Robert Wood Johnson Foundation [3]. However, ongoing efforts are needed to make improvements in the areas of access to health care, health inequities, and unhealthy behaviors. Healthy Montgomery is the County's community health improvement process that brings together County government agencies, elected officials, hospital systems, minority health initiatives/program, advocacy groups, academic institutions, community-based service providers, the health insurance community, and other stakeholders to achieve optimal health and well-being for County residents [4]. Topic areas including maternal and infant health, behavioral health, chronic disease, infectious disease, and injury are identified by Healthy Montgomery to be addressed through 4 lenses – access to care, equity, social determinants of health, and data and surveillance.

In 2022, Montgomery County Department of Health and Human Services contracted with Westat to implement a mail-in survey assessing community health needs for adults aged 18 and older living in the county. This is the first primary quantitative data collected in the county by the Health Planning and Epidemiology (HPE) on behalf of Healthy Montgomery to assess community health needs and will complement findings from the secondary quantitative data collection findings from vital records and hospitalization data, as well as qualitative data collected from key informant interviews and focus groups meetings.

This report summarizes findings from the health survey, including demographics of respondents, health and health related priorities, healthcare access, impact from COVID-19, and health status and health related behaviors.

METHODS

Survey Instrument

The survey included Figs on health and health related priorities, healthcare access, impact from COVID-19, health status and health related behaviors, and demographics. In drafting the survey, HPE reviewed Figs from community health needs surveys as well as Figs from the Behavioral Risk Factor Surveillance System (BRFSS). The Healthy Montgomery Steering Committee and the Healthy Montgomery Community Health Needs Assessment Advisory Taskforce reviewed a draft of the survey and provided comments. The survey is available in English and Spanish.

Sample Design and Selection

The target population is adults living in households in Montgomery County. The sample of households was selected using address-based sampling (ABS). ABS uses sampling frames based on the U.S. Postal Service Computerized Delivery Service (CDS) file. ABS frames provide the most complete coverage available of residential addresses in the U.S. [5]. In order to support estimates for race/ethnic minorities, addresses were stratified by race/ethnic composition of the ZIP code, and those in ZIP codes where Blacks, Asians, Other (non-White) races, and/or Hispanics comprise more than 50 percent of the population were oversampled.

Survey Implementation

Data collection began on June 21, 2022 and ended at the end of August. 9,000 surveys were mailed. 1374 completed surveys were returned to Westat. The response rate for the survey is 15.3%.

Weighting

The computation of the survey weights began with the address base weight, which is the reciprocal of the probability of selection of the address; as such, the base weight accounts for the differential selection of addresses by ZIP code. To adjust for differential nonresponse and for differential coverage of households and persons, a raking adjustment [6] was used. The base weights were adjusted such that survey weighted totals match external totals for Montgomery County derived from the American Community Survey (ACS) on four dimensions: (1) age category by sex; (2) Hispanic origin/race; (3) marital status; and (4) educational attainment. Tabulations of the 2015-2019 5-year ACS were used as the control totals themselves or, in cases in which the universe for the tabulation did not match the survey population exactly, to derive the control totals. Prior to raking, the survey variables used in the raking adjustment were imputed using the hot deck method [7].

For computing basic descriptive statistic point estimates, the survey weights themselves are sufficient to account for the complex sample design. But for estimating the precision of those estimates (e.g., producing standard errors, confidence intervals, or hypothesis tests), it is necessary to use a method that takes into account the precision effects of the complex sampling and estimation procedures used in this study. To that end, jackknife replicate weights [8] are provided along with the full-sample weight. The full-sample weight is the variable RKWT, and the jackknife replicate weights are the variables RKWT1 - RKWT82. Variables indicating the variance strata (VARSTRAT) and clusters (VARUNIT) are also provided, for use in software that uses the Taylor series linearization approach [9] to estimate the precision of survey estimates. The raking adjustment applied to the full-sample base weights was also applied to each set of replicate base weights to compute the final, raked replicate weights.

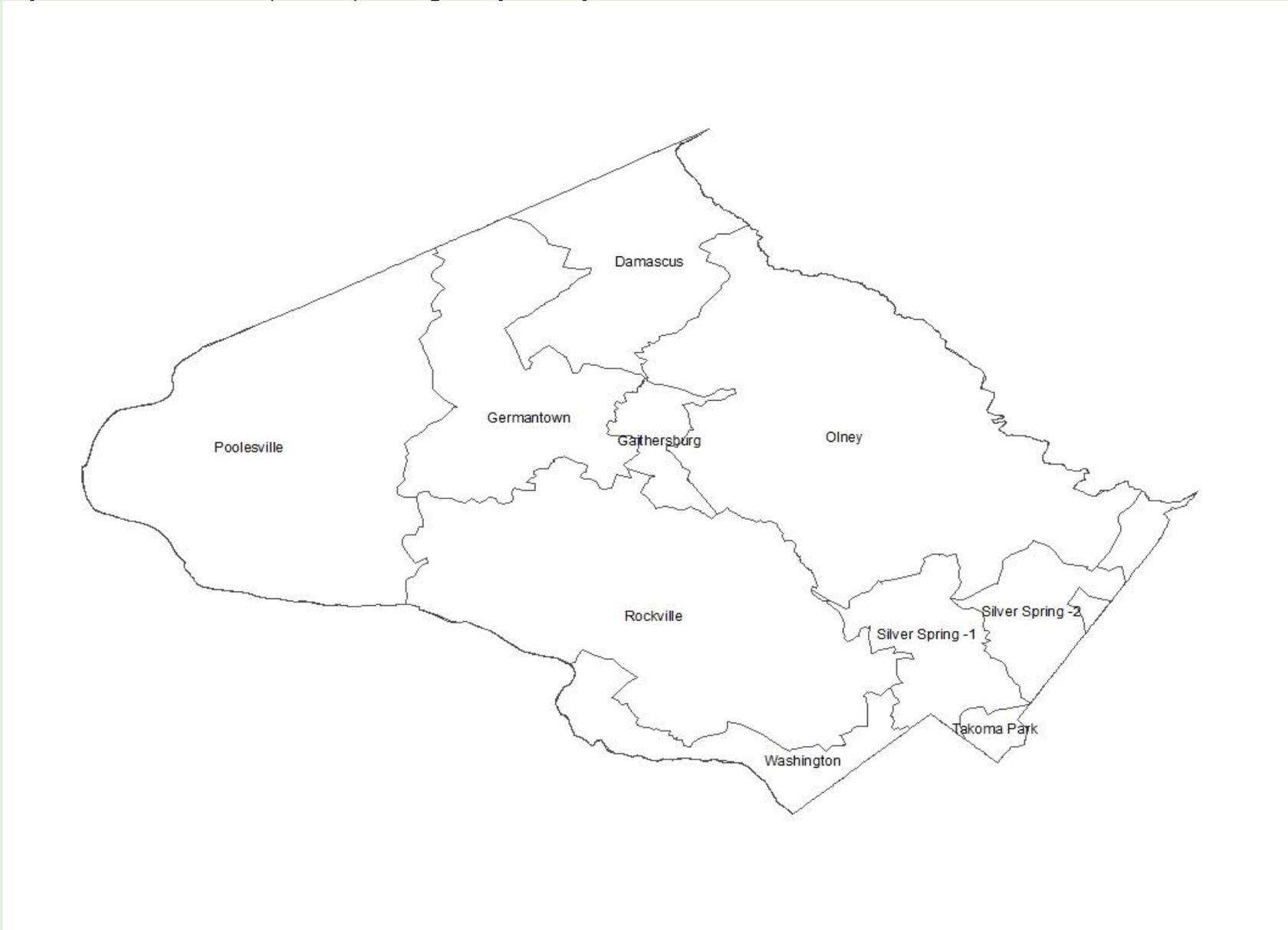
Primary Care Service Area

Primary Care Service Areas (PCSA) are geographic areas that are self-sufficient markets of primary care. These areas are designed in a manner such that the majority of patients living in these areas use primary care services form within the area. This ensures that nay geographic targeting of policies and resources reach the patients they are meant for. There are eleven PCSAs in Montgomery County including Damascus, Gaithersburg, Germantown, Laurel, Olney, Poolesville, Rockville, Silver Spring 1, Silver Spring 2, Takoma Park, and Washington. The list of zip codes included in each PCSA is in Table 2. A map depicting the PCSAs in Montgomery County is in Map 1. Health equity among population subgroups on race/ethnicity is examined within each PCSA and County overall to understand its variations geographically.

Table 1. List of Zip Codes for Primary Care Service Areas, Montgomery County, MD

Damascus	Gaithersburg	Germantown	Olney	Poolesville	Rockville	Silver Spring 1	Silver Spring 2	Takoma Park	Washington
20871	20877	20874	20830	20837	20810	20901	20903	20912	20812
20872	20879	20875	20832	20838	20811	20902	20904	20913	20813
	20884	20876	20833	20839	20814	20907	20914		20815
	20886	20885	20853	20841	20817	20910	20993		20816
	20898	20899	20855	20842	20824	20911			20818
			20860		20827	20915			20825
			20861		20847	20918			
			20862		20848				
			20868		20849				
			20880		20850				
			20882		20851				
			20897		20852				
			20905		20854				
			20906		20857				
			20908		20859				
			20916		20878				
					20883				
					20889				
					20891				
					20892				
					20894				
					20895				
					20896				
					20997				

Fig 1. Primary Care Service Areas (PCSAs), Montgomery County, MD



I. Respondent Demographics

The overall response rate was 15.3% (1,374/9,000), there were more female (52.4%, 95% CI: 51.4-53.3) respondents compared to males (47.5%, 95% CI: 46.6-48.3) (Fig 2). Age breakdowns for respondents are in Fig 3, aged 35-64 was the highest (49.4%), followed by aged 65+ (44.3%), and aged 18-34 (6.3%).

81.9% of respondents identified as non-Hispanic (95% CI: 80.9-82.9) (Fig 4). 57.8% of respondents identified as white (95% CI: 54.7-61.0), followed by African American (14.8%, 95% CI: 13.4-16.1), and Asian/Pacific Islander (13.1%, 95% CI: 12.3-13.8) (Fig 5). 56.1% of respondents were married (95% CI: 55.7-56.4), followed by 28.5% who were never married (95% CI: 28.3-28.7), 8.3% who were divorced (95% CI: 6.6-10.0), 5.1% who were widowed (95% CI: 3.4-6.8) and 2.1% who were separated (95% CI: 0.6-3.5) (Fig 6).

Fig 2. Respondents by Sex

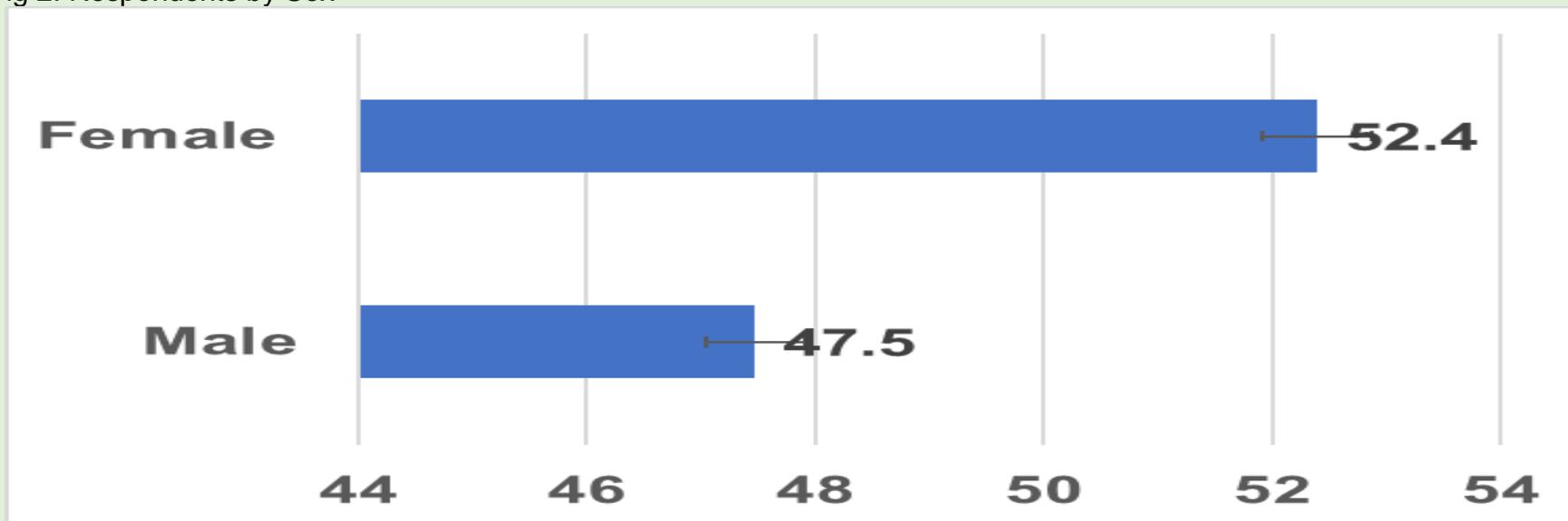


Fig 3. Respondents by Age

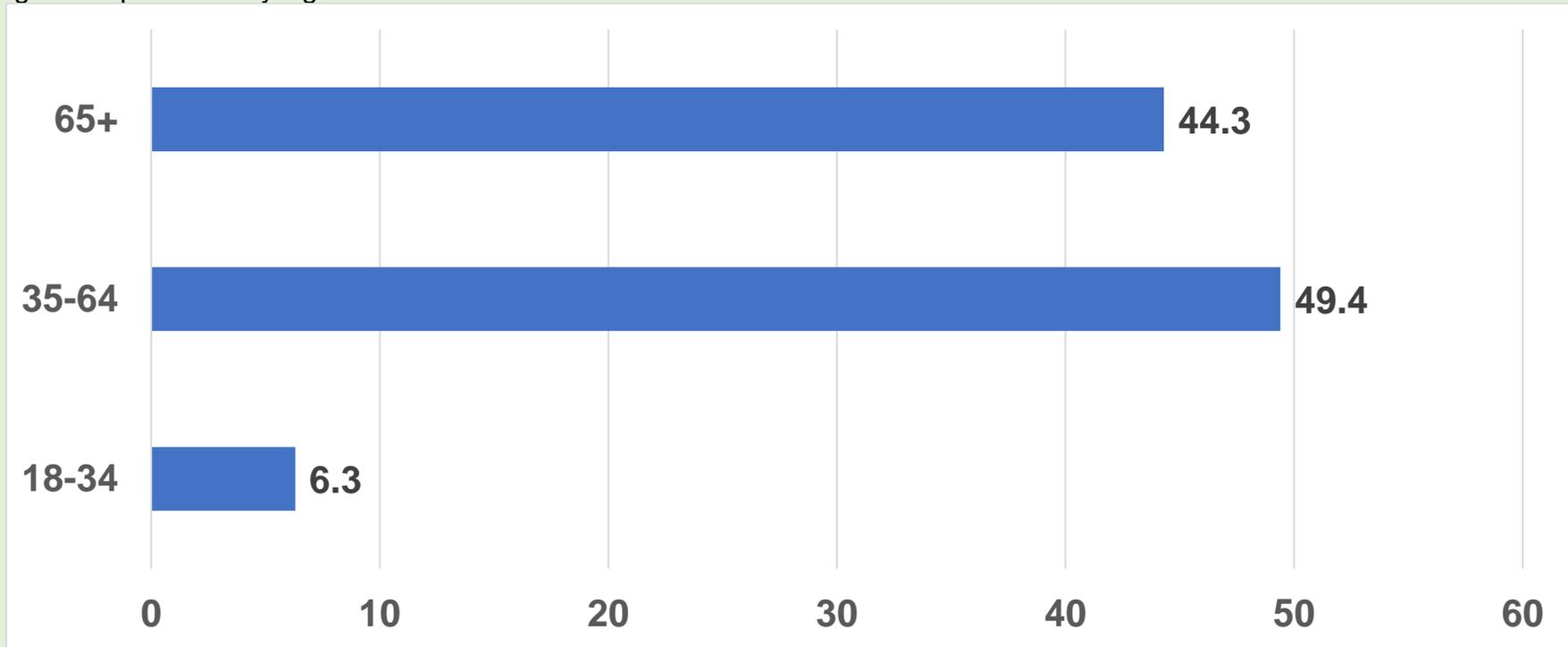


Fig 4. Respondents by Hispanic Origin

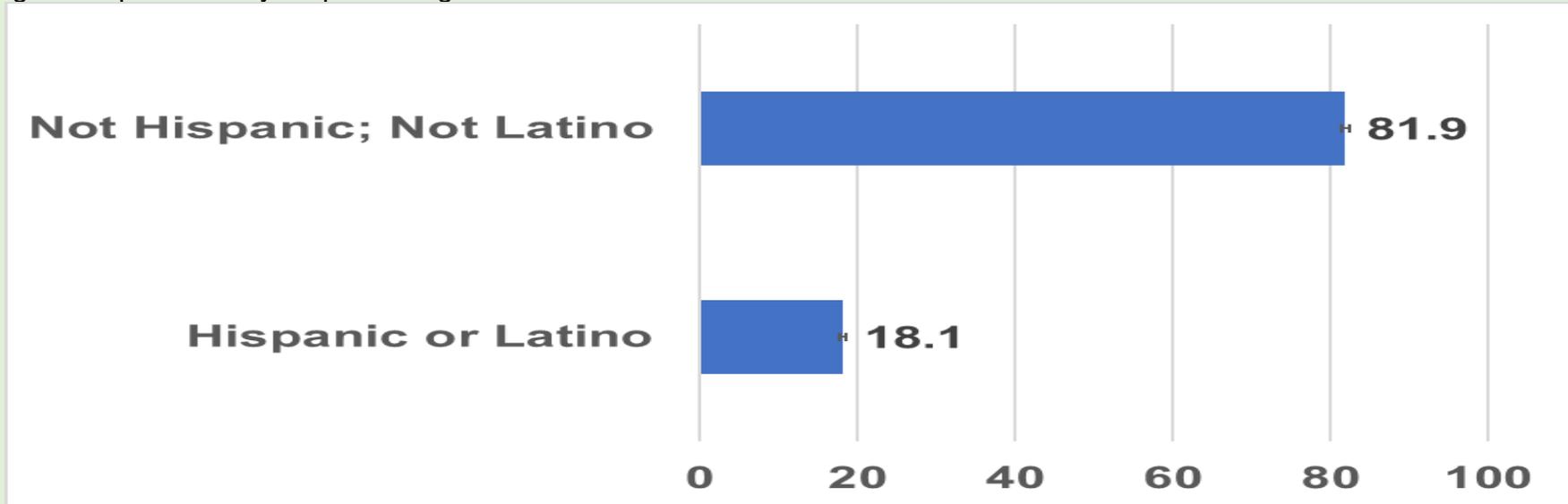


Fig 5. Respondents by Race

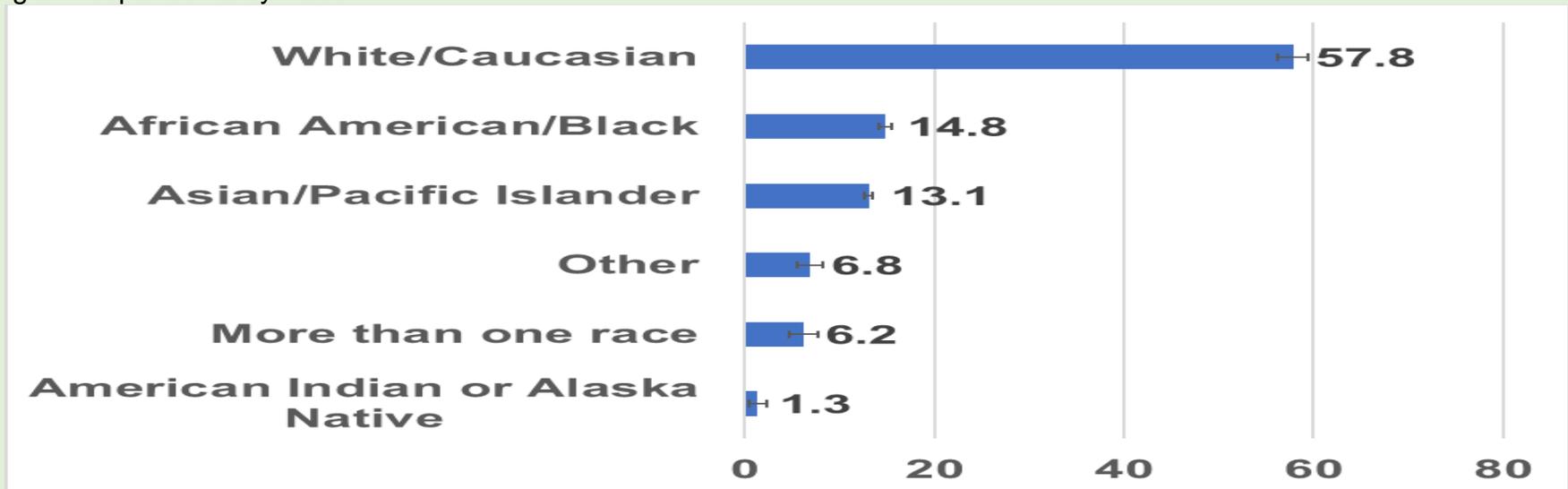
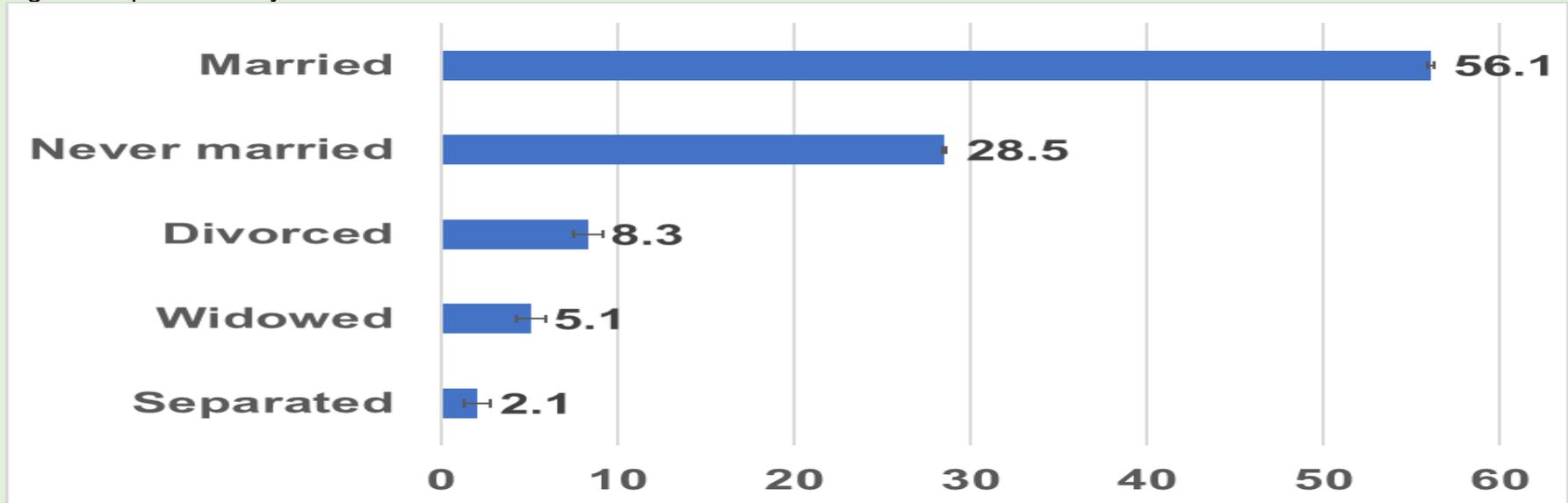


Fig 6. Respondents by Marital Status



29.0% of respondents had a postgraduate degree (95% CI: 28.6-29.3) followed by those who graduated college (26.3%, 95% CI: 25.8-26.8) (Fig 7). 60.1% of respondents were employed working full-time (95% CI: 55.2-64.9) and 17.4% of respondents were retired (95% CI: 15.2-19.6) (Fig 8). 43.9% of respondents had income over \$100,000 (95% CI: 37.7-50.1) and 10% of respondents had income less than \$20,000 (95% CI: 6.4-13.6) (Fig 9).

Fig 7. Respondents by Education

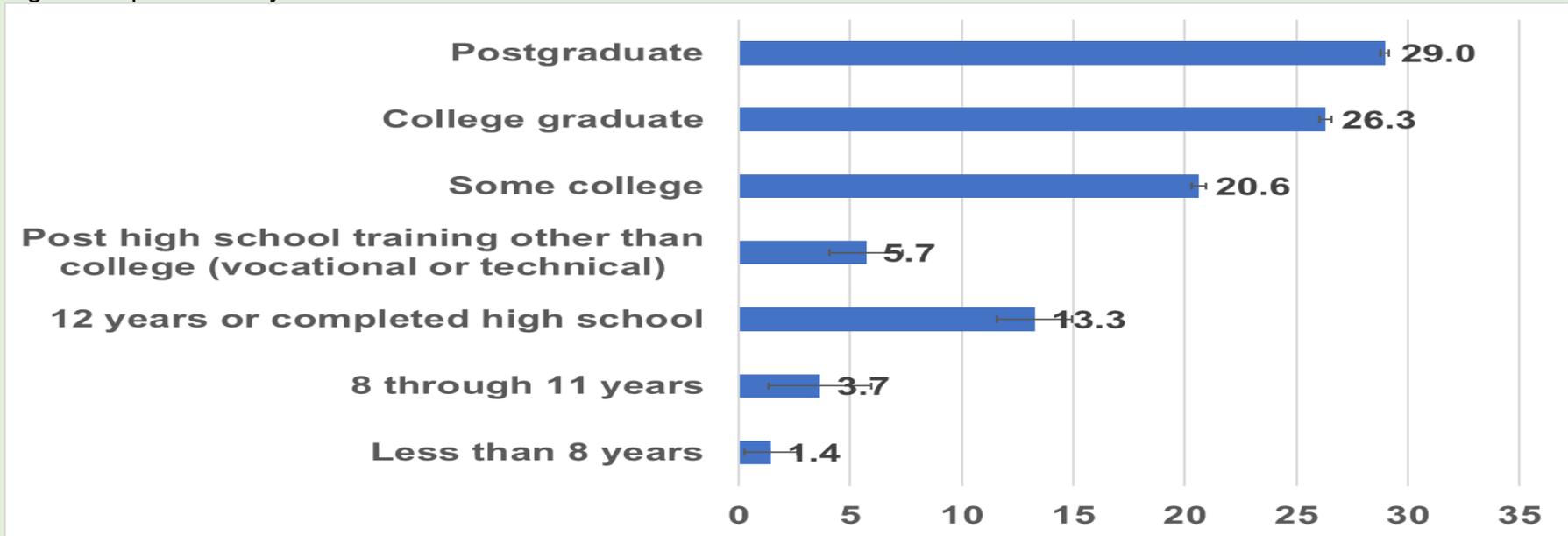
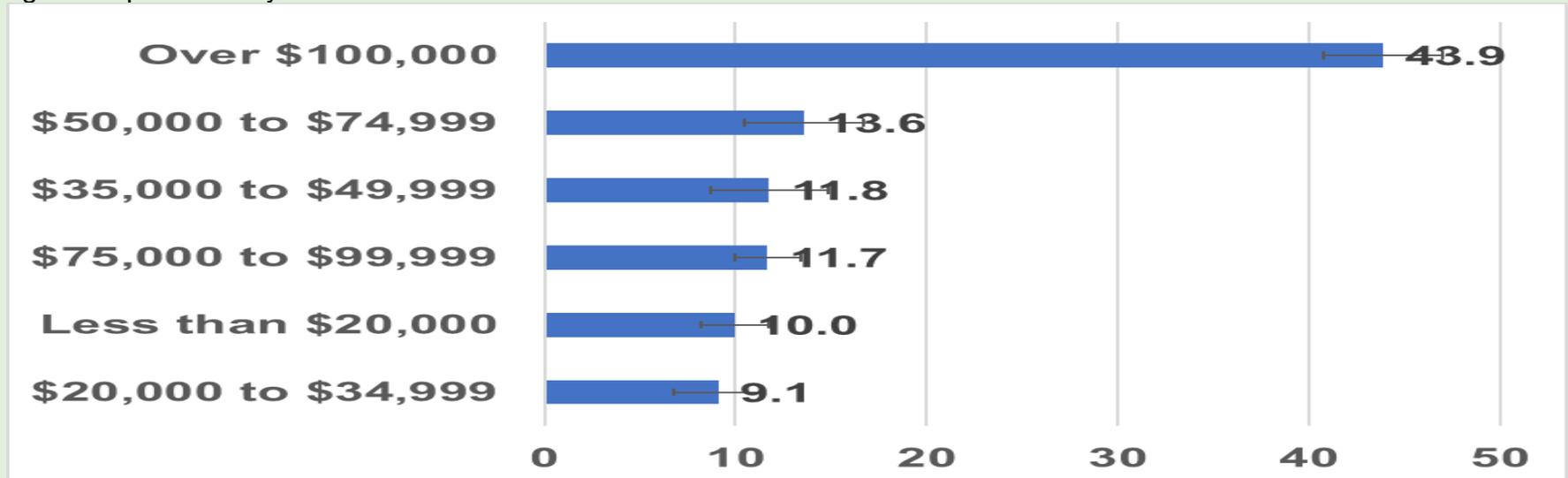


Fig 8. Respondents by Employment Status



Fig 9. Respondents by Income



II. Health and Health Related Priorities

Prior to this survey, there has been limited information related to perceptions of Montgomery County residents on health issues and social determinants of health. Many previous surveys conducted across these health-related topic areas used convenience sampling and did not adequately include all populations in the county. The findings below provide a unique snapshot of how county residents perceive as the most important health priorities, social/environmental problems, and health and risky behaviors during the COVID-19 pandemic as of June 2022. This information can help program managers, planners, non-profits, and other stakeholders plan outreach, education, and other public health programs for community health improvement.

Health Problems Affecting Health of a Community

Based on all completed survey responses, the three most important health problems that affect residents and their community are mental health (18.3%), COVID-19 (12.9%), cancer (11.0%) and overweight/obesity (11.0%) (Fig 10). Men identified mental health problems (16.8%), COVID-19 (13.9%), and overweight/obesity (11.2%) as the three most important problems that affect them and their community, while women identified mental health problems (16.8%), COVID-19 (13.9%), and overweight/obesity (11.2%) as the three most important problems that affect them and their community (Fig 11).

Fig 10. Health Problems Affecting Health of a Community

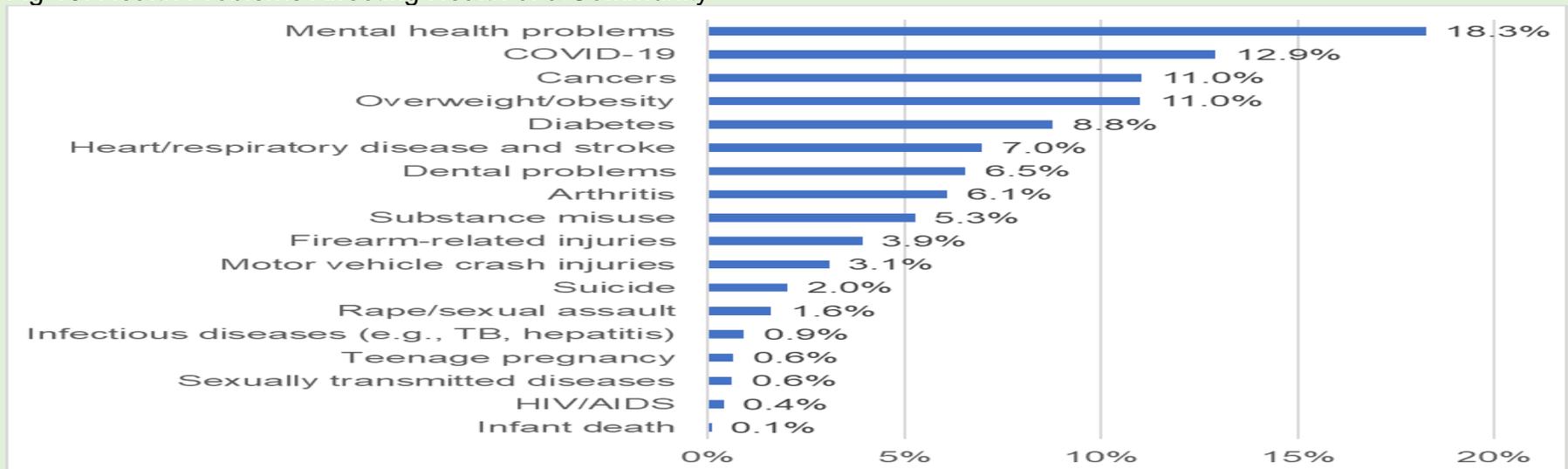
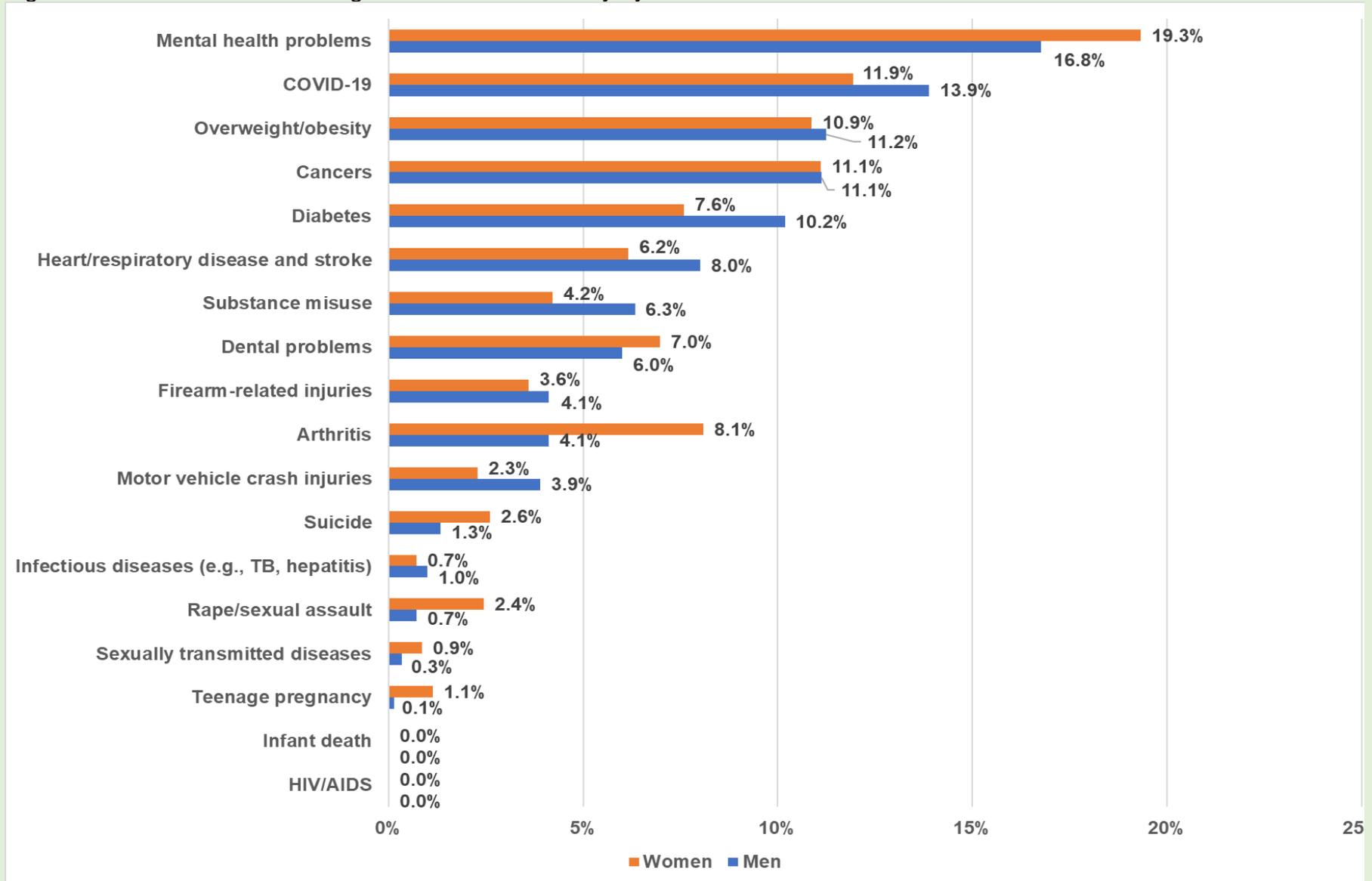


Fig 11. Health Problems Affecting Health of a Community by Sex



The results of most important health problems that affect the health of residents and their community by age are in Fig 12. Adult residents aged 18 to 34 identified mental health problems (22.7%), COVID-19 (14.9%), and cancer (11.0%) as the three most important problems that affect them and their community. Adult residents aged 35 to 64 identified mental health problems (18.3%), overweight/obesity (12.5%) and COVID-19 (12.3%) as the three most important problems that affect them and their community. Elderly residents aged 65 and over identified arthritis (12.2%), cancer (12.0%) and mental health problems (12.0%) as the three most important problems that affect them and their community.

The results of most important health problems that affect the health of residents and their community by race/ethnicity are in Fig 13. Residents that identified as white ranked mental health problems (21.3%), COVID-19 (12.9%), and overweight/obesity (12.4%) as the three most important problems that affect them and their community. African American residents ranked diabetes (14.2%), mental health problems (13.7%), and overweight/obesity (9.9%) as the three most important problems that affect them and their community. Hispanic residents ranked mental health problems (15.2%), overweight/obesity (14.5%) and diabetes (11.5%) as the three most important problems that affect them and their community. Asian residents ranked COVID-19 (21.9%), mental health problems (12.3%), and diabetes (12.2%) as the three most important problems that affect them and their community.

Fig 12. Health Problems Affecting Health of a Community by Age

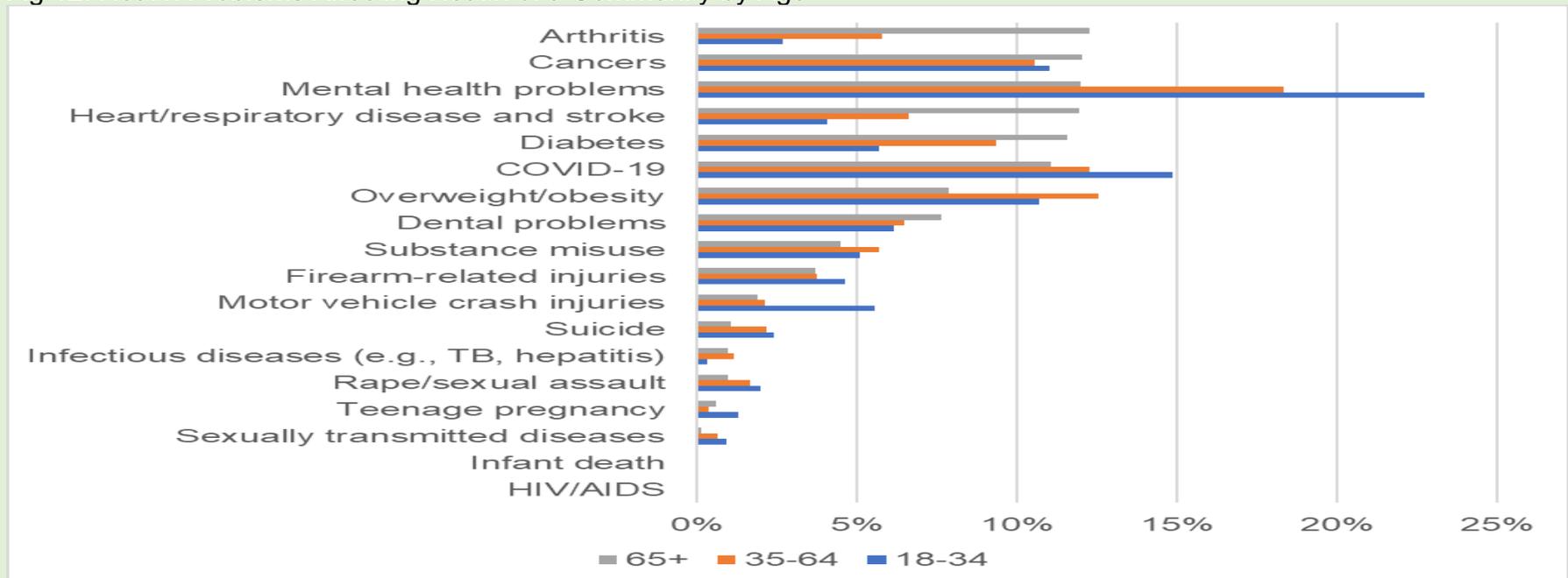
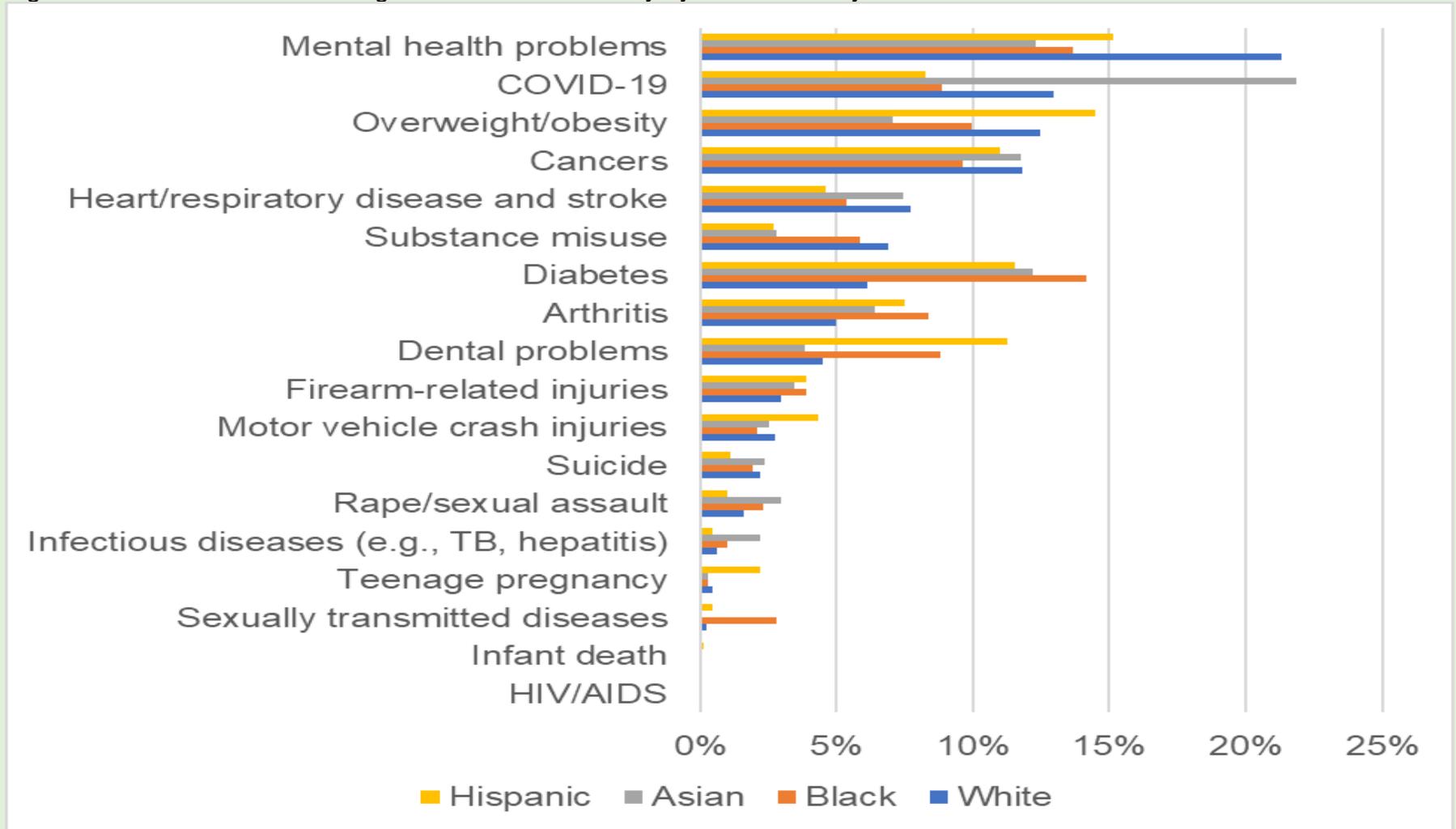


Fig 13. Health Problems Affecting Health of a Community by Race/Ethnicity



The results of most important health problems that affect the health of residents and their community by PCSA areas are in Table 2. Though results varied by PCSA area, mental health, COVID-19, and cancers are among the top 5 health problems across all PCSA areas.

Table 2. Health Problems Affecting Health of a Community by PCSA Areas

Health Problem	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Arthritis	7.8 (1.03-14.60)	7.9 (5.28-10.53)	3.3 (2.40-4.19)	7.1 (4.64-9.50)
Cancers	10.4 (0-22.23)*	10.5 (7.06-13.91)	12.9 (8.67-17.20)	8.8 (2.63-15.04)
COVID-19	10.1 (5.18-15.06)	12.1 (5.65-18.55)	15.1 (10.91-19.38)	12.5 (6.89-18.17)
Dental problems	7.5 (3.50-11.53)	9.2 (3.72-14.76)	4.4 (1.31-7.43)	6.3 (1.43-11.22)
Diabetes	12.0 (3.64-20.27)	10.3 (2.35-18.16)	6.3 (4.51-8.13)	7.9 (4.36-11.45)
Firearm-related injuries	3.2 (0-6.67)	4.1 (0-9.48)	3.1 (1.45-4.76)	5.5 (2.75-8.24)
Heart/respiratory disease and stroke	4.2 (1.46-6.85)	9.3 (4.34-14.22)	7.0 (4.51-9.49)	6.8 (3.91-9.75)
HIV/AIDS		1.5 (0-3.78)		0.2 (0-.57)
Infant death	0.1 (0-.18)	0.3 (0-.73)	0.0 (0-.09)	0.1 (0-.20)
Infectious diseases (e.g., TB, hepatitis)	0.6 (0-1.98)	0.7 (0-1.79)	1.2 (0.17-2.14)	0.7 (0-1.81)
Mental health problems	18.0 (6.81-29.27)	14.9 (8.94-20.80)	22.5 (17.13-27.82)	15.8 (11.34-20.19)
Motor vehicle crash injuries	2.0 (0-4.96)	4.9 (.66-9.04)	2.1 (0.49-3.69)	3.7 (2.38-5.01)
Overweight/obesity	16.1 (5.76-26.52)	7.0 (4.17-9.83)	10.3 (7.43-13.20)	12.3 (7.60-16.91)
Rape/sexual assault	1.7 (0.82-2.50)	1.0 (0-2.51)	1.6 (0-3.43)	2.1 (0-4.53)
Sexually transmitted diseases		0.2 (0-.54)	0.3 (0-0.76)	2.2 (0-5.55)
Substance misuse	4.4 (2.07-6.81)	4.2 (1.68-6.69)	6.8 (3.42-10.12)	4.9 (1.73-8.04)
Suicide	1.1 (0-2.31)	1.1 (0-3.04)	3.0 (0-7.19)	2.2 (0-4.86)
Teenage pregnancy	0.8 (0-2.51)	1.1 (0-3.91)	0.1 (0-0.34)	0.9 (0-1.89)

* Top 5 are highlighted.

Social/Environmental Problems Affecting Health of a Community

The five most important social/environmental problems that affect residents and their community's health are availability/access to insurance (12.8%), housing/homelessness (10.9%), lack of affordable childcare (9.8%), neighborhood safety/violence (9.6%), and race/ethnicity discrimination (8.5%) (Fig 14). Men identified availability/access to insurance (13.7%), housing/homelessness (10.8%), neighborhood safety/violence (9.9%), lack of affordable childcare (8.8%), and transportation problems (8.2%) as the top social/environmental problems that affect them and their community, while women identified availability/access to insurance (12.4%), housing/homelessness (11.1%), lack of affordable childcare (10.7%), race/ethnicity discrimination (9.2%) and neighborhood safety/violence (9.2%) as important social/environmental problems that affect them and their community (Fig 15).

Fig 14. Social/environmental Problems Affecting Health of a Community

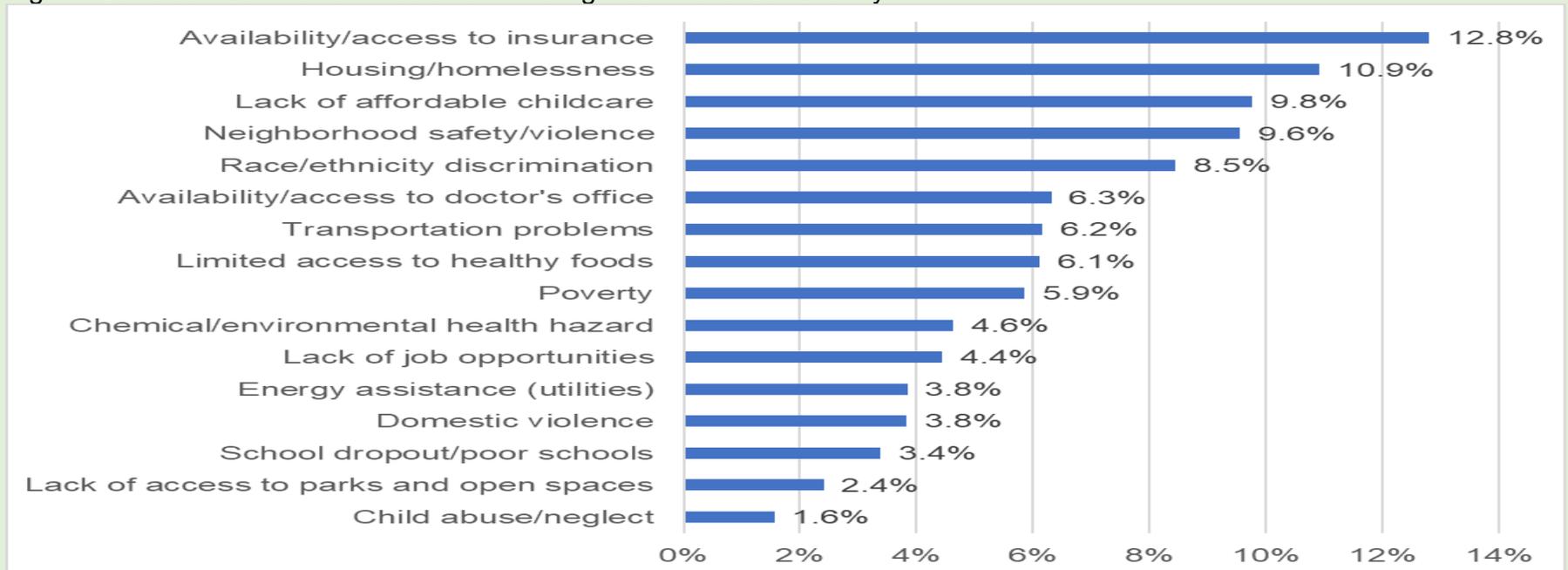
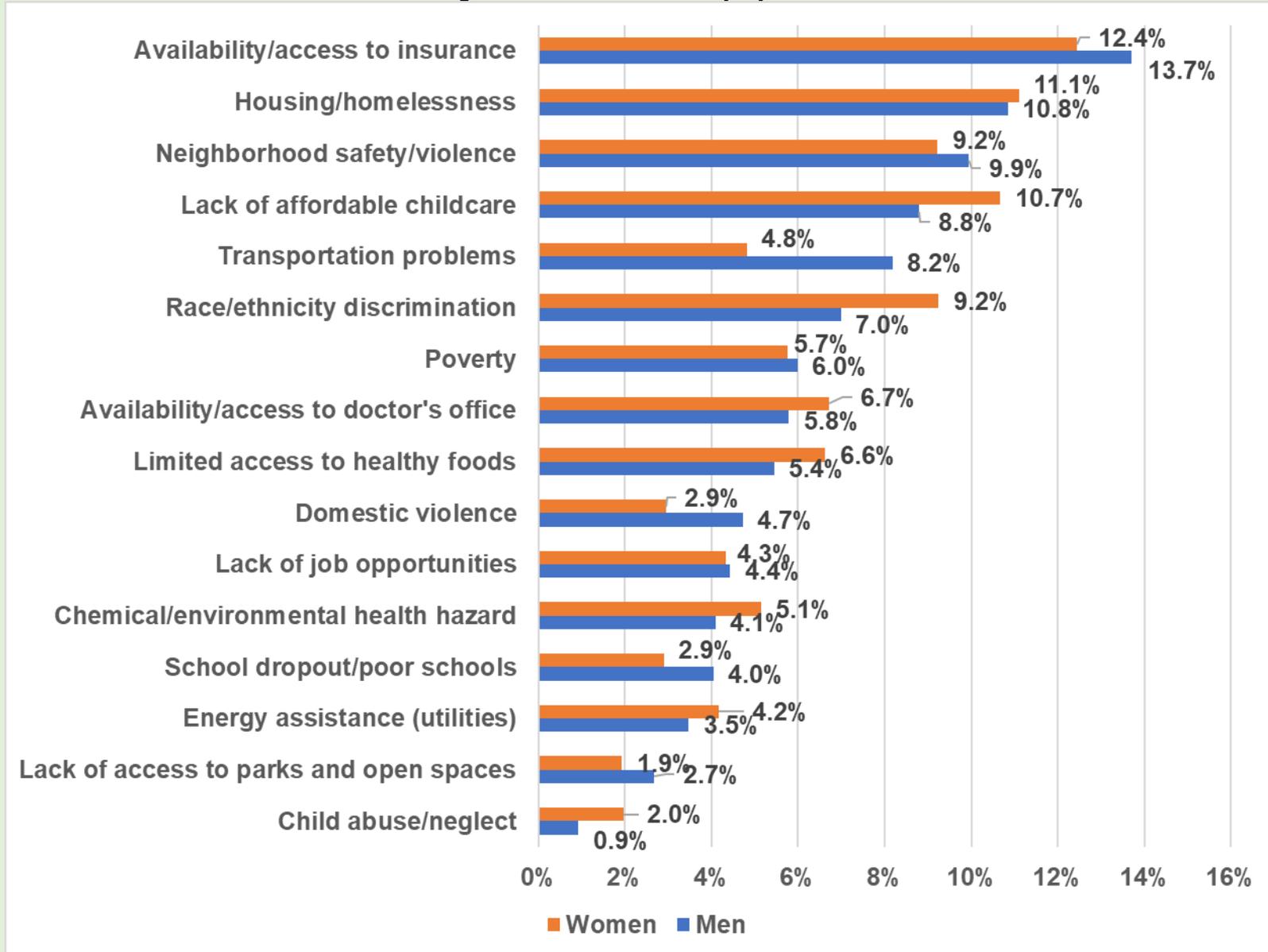


Fig 15. Social/environmental Problems Affecting Health of a Community by Sex



The results of most important social/environmental problems that affect the health of residents and their community by age are in Fig 16. Adult residents aged 18 to 34 identified availability/access to insurance (15.4%), housing/homelessness (12.8%), lack of affordable childcare (9.2%), transportation problems (8.0%), and race/ethnicity discrimination (7.6%) as top social/environmental problems that affect health. Adult residents aged 35 to 64 identified availability/access to insurance (12.6%), lack of affordable childcare (10.5%), neighborhood safety/violence (10.3%), housing/homelessness (10.2%), and race/ethnicity discrimination (8.5%) as top social/environmental problems affecting health. Elderly residents aged 65 and over ranked neighborhood safety/violence (11.1%), housing/homelessness (9.8%), race/ethnicity discrimination (9.6%), lack of affordable childcare (9.2%), and availability/access to insurance (8.7%) as top social/environmental problems that affect them and their community.

The results of most important social/environmental problems that affect the health of residents and their community by race/ethnicity are in Fig 17. Residents that identified as white ranked availability/access to insurance (13.3%), lack of affordable childcare (12.0%), housing/homelessness (11.8%), neighborhood safety/violence (9.7%), and transportation problems (7.3%) as the five most important social/environmental problems that affect their health and the health of the community. The top issues were availability/access to insurance (12.3%), housing/homelessness (11.9%), race/ethnicity discrimination (9.9%), neighborhood safety/violence (8.1%), and lack of affordable childcare (7.6%) for African American residents. Hispanic residents ranked diabetes (14.2%), mental health problems (13.7%), and overweight/obesity (9.9%) as the three most important problems that affect them and their community. Hispanic residents ranked availability/access to insurance (18.2%), limited access to healthy foods (9.7%), race/ethnicity discrimination (9.7%), lack of affordable childcare (8.7%), and lack of job opportunities (8.1%) as top issues. Asian residents ranked neighborhood safety/violence (13.4%), availability/access to insurance (13.2%), race/ethnicity discrimination (10.7%), availability/access to doctor's office (8.1%), and housing/homelessness (7.6%) the most important social/environmental problems that affect them and their community.

Fig 16. Social/environmental Problems Affecting Health of a Community by Age

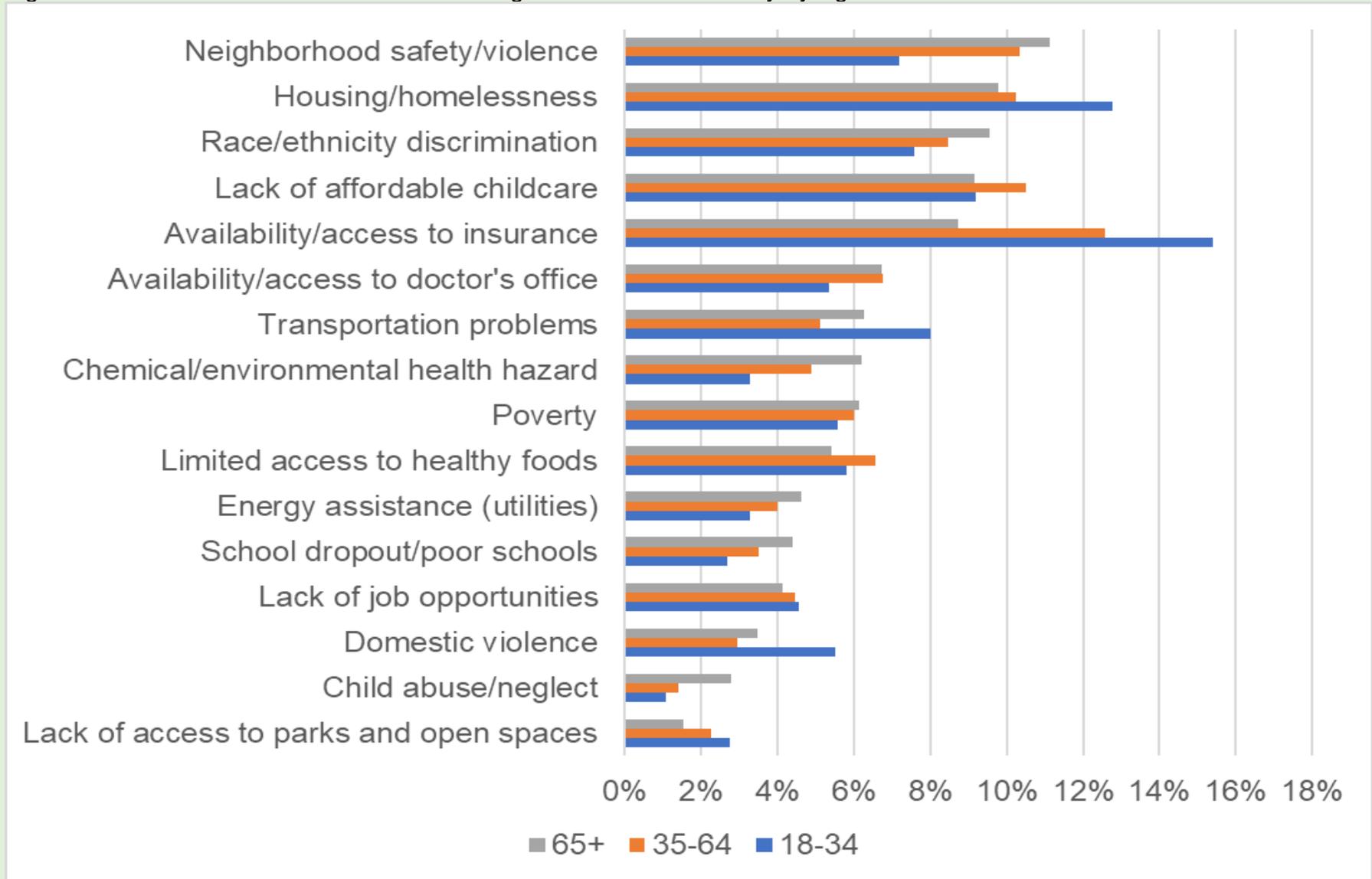
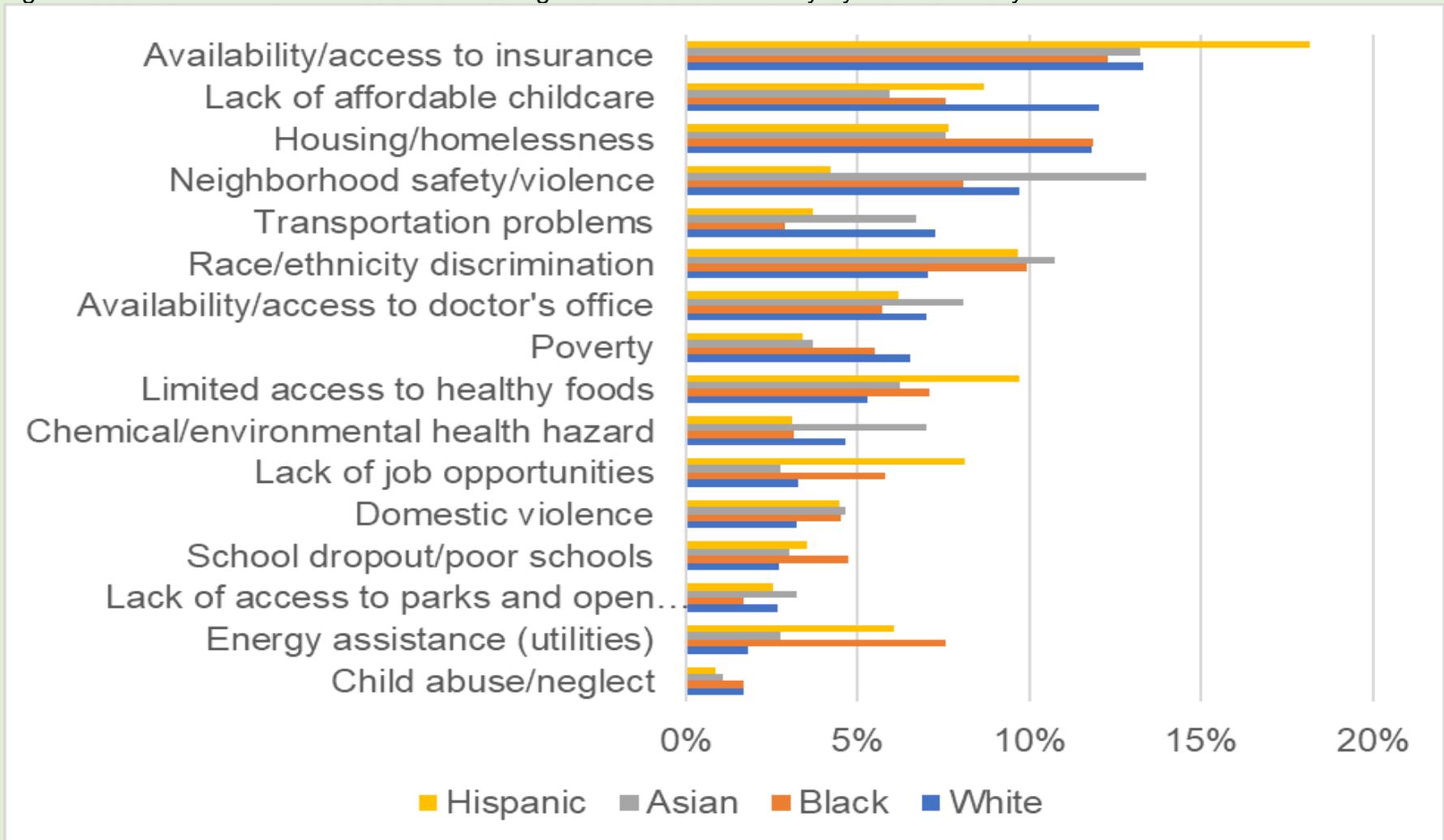


Fig 17. Social/environmental Problems Affecting Health of a Community by Race/ethnicity



The results of most important social/environmental problems that affect the health of residents and their community by PCSA areas are in Table 3. Though results varied by PCSA area, availability/access to insurance, housing/homelessness, and neighborhood safety/violence are among the top 3 social/environmental problems across all PCSA areas.

Table 3. Social/environmental Problems Affecting Health of a Community by PCSA Areas

Social/Environmental problem	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Availability/access to doctor's office	6.47 (0.05-12.89)	6.91 (4.14-9.67)	6.98 (4.78-9.18)	4.92 (3.18-6.66)
Availability/access to insurance	14.25 (6.03-22.47)	14.03 (9.60-18.45)	12.78 (7.99-17.58)	10.70 (8.04-13.36)
Lack of access to parks and open spaces	1.71 (0-3.59)	2.62 (0.41-4.82)	2.89 (0.37-5.42)	1.80 (1.05-2.55)
Chemical/environmental health hazard	5.17 (0-11.28)	4.84 (3.96-5.71)	4.30 (2.18-6.42)	4.34 (1.88-6.81)
Domestic violence	3.49 (1.10-5.88)	4.65 (0-10.51)	3.16 (0.23-6.08)	4.28 (1.61-6.95)
Limited access to healthy foods	8.43 (0.17-16.68)	6.96 (3.55-10.37)	3.93 (1.97-5.89)	6.44 (4.80-8.09)
School dropout/poor schools	4.53 (0-10.27)	2.24 (0.32-4.16)	1.90 (0.24-3.56)	5.58 (2.66-8.49)
Lack of job opportunities	5.42 (0.45-10.38)	6.28 (1.53-11.03)	2.96 (1.80-4.12)	4.04 (1.07-7.09)
Race/ethnicity discrimination	7.34 (1.80-12.89)	10.06 (4.09-16.04)	7.19 (4.82-9.55)	9.04 (5.03-13.05)
Child abuse/neglect	2.04 (0.78-3.29)	.72 (0.05-1.39)	1.35 (0.19-2.51)	2.19 (0.48-3.89)
Lack of affordable childcare	9.93 (4.14-15.71)	6.12 (3.24-8.99)	12.53 (8.79-16.27)	9.26 (7.85-10.66)
Housing/homelessness	9.17 (4.58-13.76)	10.09 (5.38-14.81)	12.45 (5.87-19.03)	11.24 (7.10-15.38)
Energy assistance (utilities)	4.73 (1.06-8.41)	4.56 (0-12.47)	3.03 (0.45-5.60)	3.59 (2.22-4.95)

Neighborhood safety/violence	9.27 (7.07-11.48)	8.12 (3.17-13.08)	9.74 (4.63-14.85)	10.61 (6.20-15.02)
Poverty	3.88 (1.46-6.29)	5.73 (3.78-7.67)	5.58 (2.67-8.48)	8.12 (5.05-11.19)
Transportation problems	4.19 (0.20-6.37)	6.09 (1.05-11.12)	9.23 (4.97-13.50)	3.85 (1.74-5.96)

* Top 5 are highlighted.

Risky Behaviors Affecting Health of a Community

The three most important risky behaviors that affect health are poor eating habits (17.4%), lack of exercise (17.1%), and texting/on the phone while driving (16.6%) (Fig 18). In men, poor eating habits (17.9%), texting/on the phone while driving (17.1%) and lack of exercise (16.9%) were top risky behaviors while women ranked lack of exercise (17.2%) as the top risky behavior, followed by poor eating habits (17.0%) and texting/on the phone while driving (16.4%) (Fig 19).

Fig 18. Risky Behaviors Affecting Health of a Community

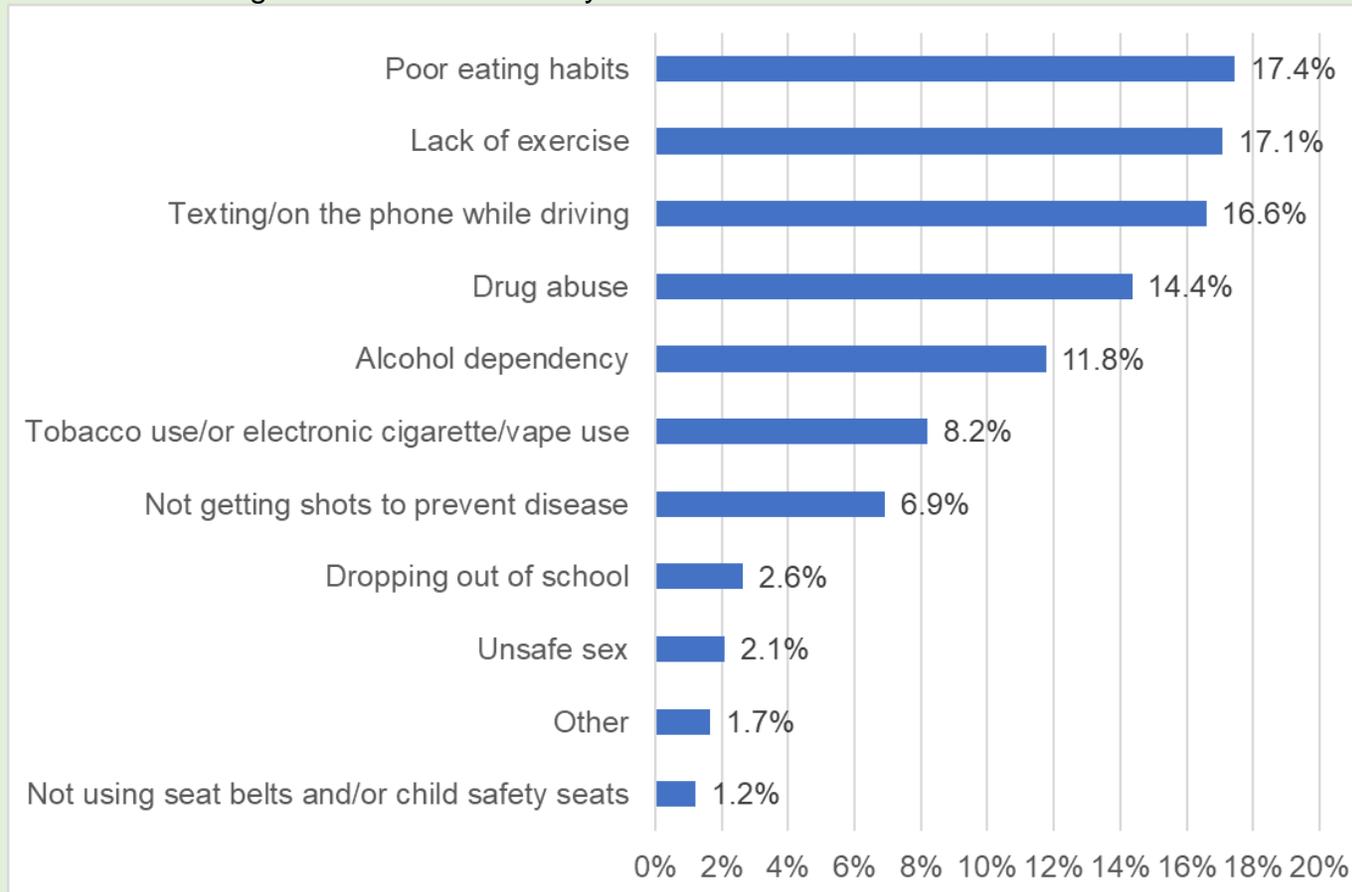
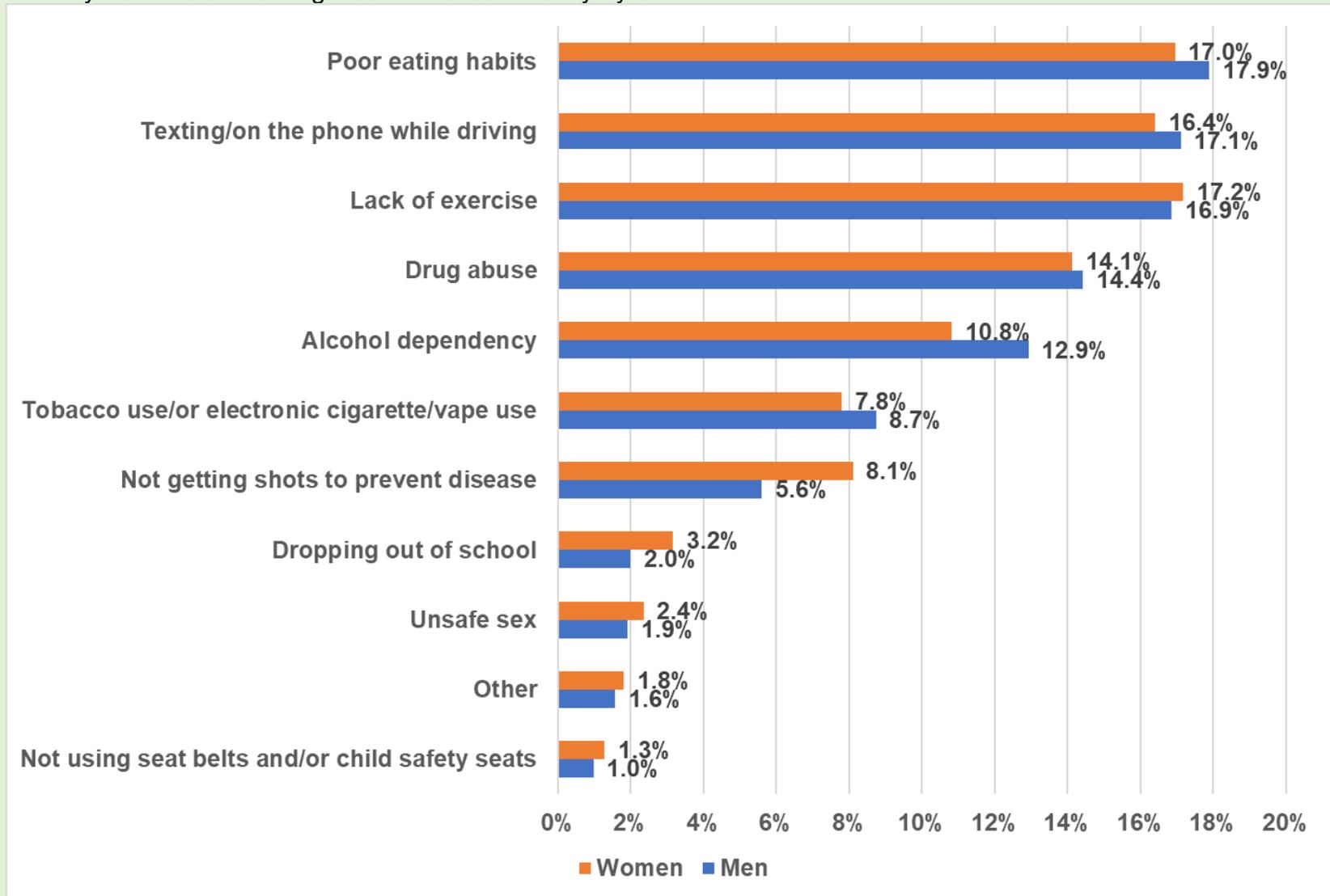


Fig 19. Risky Behaviors Affecting Health of a Community by Sex



The results of most important risky behaviors that affect the health of residents and their community by age are in Fig 20. Adult residents aged 18 to 34 identified poor eating habits (18.0%), lack of exercise (16.2%) and texting/on the phone while driving (15.5%) as top risky behaviors affecting health. Adults aged 35 to 64 identified the same top risky behaviors (poor eating habits -18.6%, lack of exercise -17.2%, and texting/on the phone while driving-17.0%). Elderly residents above age 65 ranked lack of exercise (18.2%), texting/on the phone while driving (17.5%) and drug abuse as top risky behaviors (15.9%).

The results of most important risky behaviors that affect the health of residents and their community by race/ethnicity are in Fig 21. White residents identified texting/on the phone while driving (19.5%), lack of exercise (16.6%), and poor eating habits (16.5%) while African American residents identified lack of exercise (19.7%), poor eating habits (18.5%) and drug abuse (14.7%) as the top three most important risky behaviors that affect their health. Similar to African Americans, Hispanic residents ranked poor eating habits (21.7%), drug abuse (17.5%) and lack of exercise (16.7%) as important risky behaviors and so did Asian residents (Lack of exercise – 17.9%, Drug abuse – 15.2%, and Poor eating habits - 15.1%).

Fig 20. Risky Behaviors Affecting Health of a Community by Age

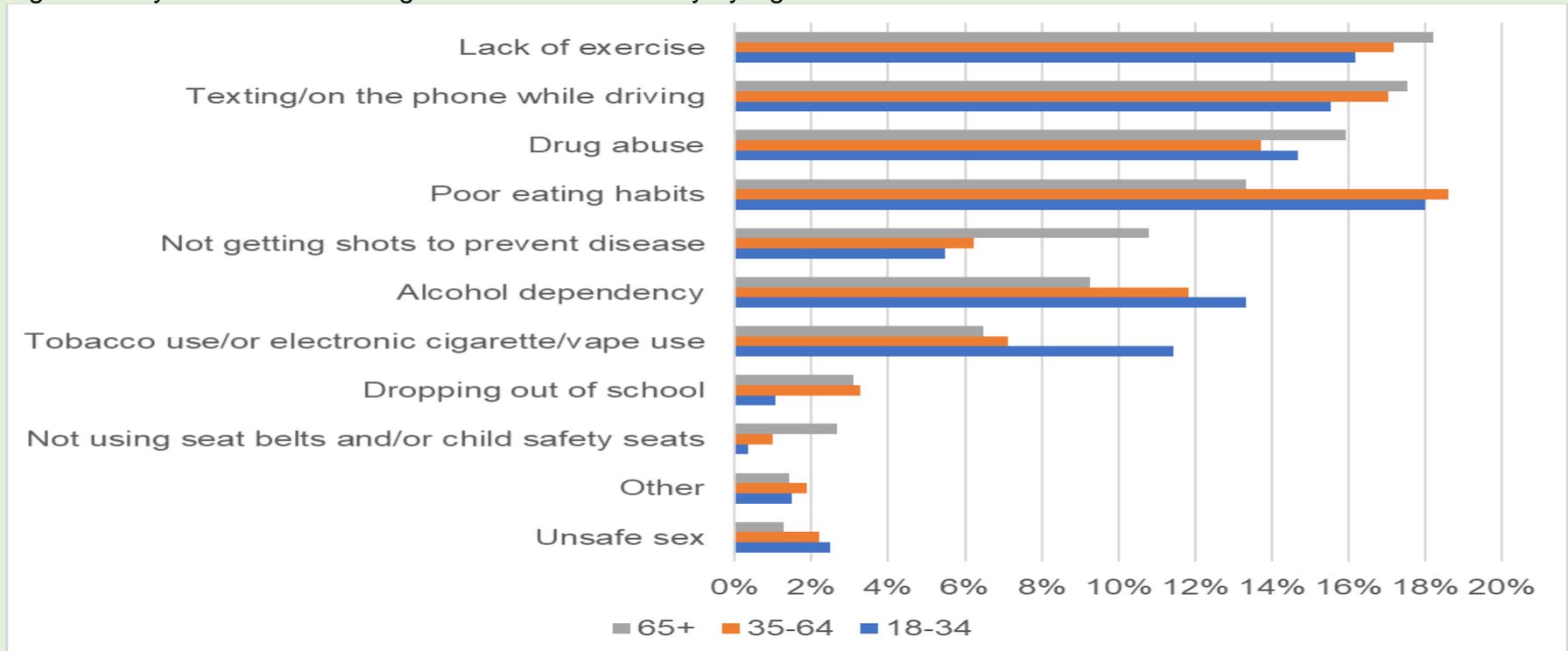
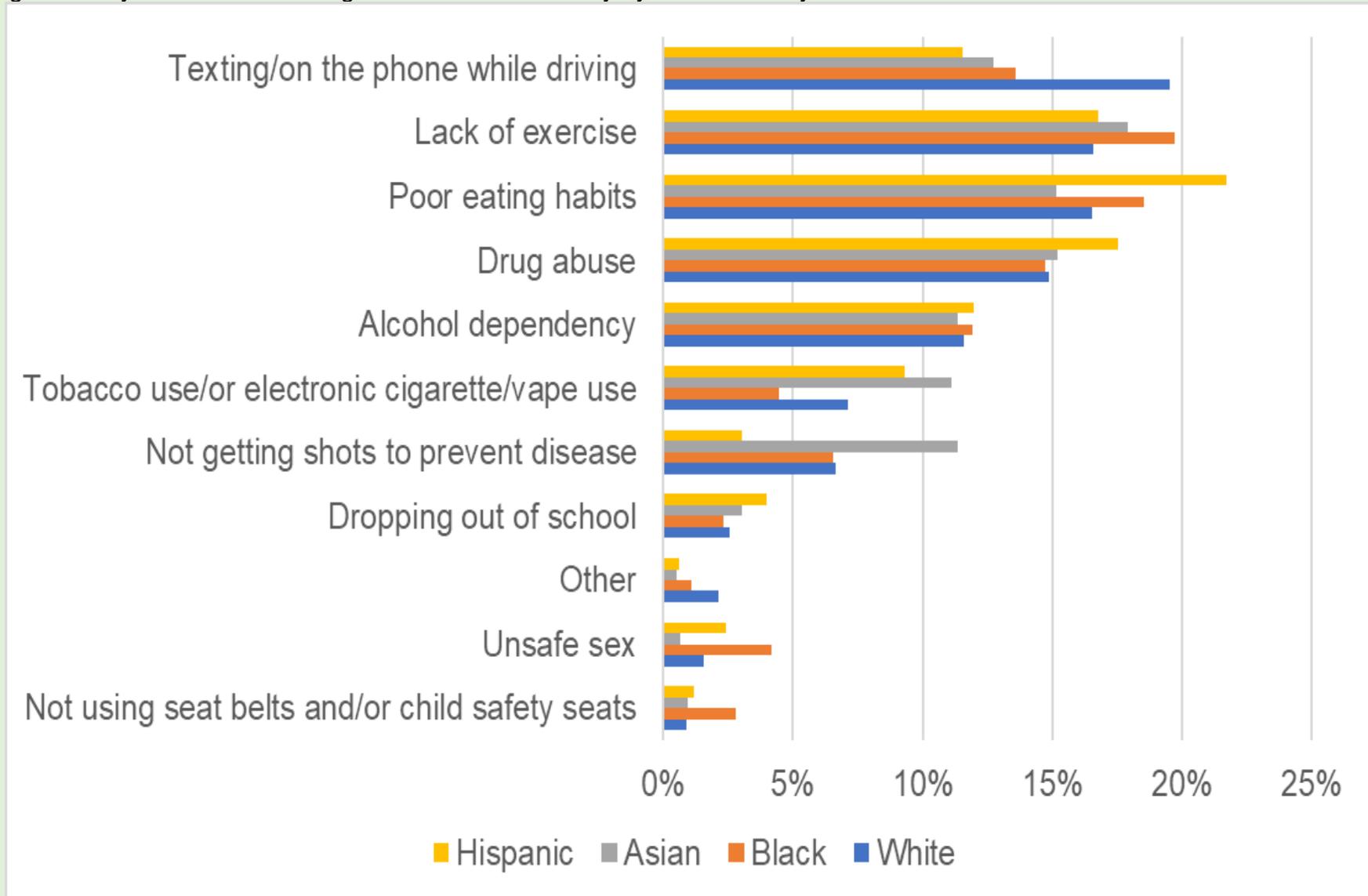


Fig 21. Risky Behaviors Affecting Health of a Community by Race/ethnicity



The results of most important risky behaviors that affect the health of residents and their community by PCSA areas are in Table 4. Though results varied by PCSA area, poor eating habits, lack of exercises, and drug abuse are among the top 5 behaviors across all PCSA areas.

Table 4. Risky Behaviors Affecting Health of a Community by PCSA Areas

Risky Behaviors	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Alcohol dependency	7.7 (2.59-12.78)	14.1 (10.22-17.93)	13.1 (7.23-18.94)	10.8 (6.10-15.56)
Dropping out of school	3.2 (0-6.81)	3.0 (1.10-4.92)	1.7 (0.29-3.01)	3.1 (1.09-5.16)
Drug abuse	18.0 (8.65-27.33)	14.4 (9.86-18.92)	13.2 (9.69-16.74)	13.2 (7.42-19.05)
Lack of exercise	19.3 (11.52-27.01)	13.9 (8.39-19.45)	16.6 (12.56-20.67)	19.3 (8.40-30.23)
Poor eating habits	22.4 (12.63-32.12)	16.7 (12.24-21.17)	14.3 (10.38-18.19)	18.9 (11.65-26.09)
Not getting shots to prevent disease	4.5 (2.47-6.45)	5.5 (2.36-8.66)	9.1 (3.40-14.88)	6.9 (2.63-11.15)
Texting/on the phone while driving	15.4 (11.50-19.37)	17.2 (12.48-21.92)	18.6 (14.25-23.0)	13.9 (10.20-17.49)
Tobacco use/or electronic cigarette/vape use	7.4 (0.77-14.07)	9.4 (4.34-14.48)	8.6 (4.10-13.08)	7.2 (2.61-11.75)
Not using seat belts and/or child safety seats	0.5 (0-1.48)	1.1 (0-3.28)	1.1 (0-2.39)	1.9 (0-4.09)
Unsafe sex	0.3 (0-0.53)	3.2 (0-8.68)	1.4 (0-2.80)	3.8 (0.22-7.28)
Other	1.4 (0-2.81)	1.5 (0.09-2.91)	2.3 (0.59-4.07)	1.1 (0.12-1.97)

* Top 5 are highlighted.

Factors Making up a Healthy Community

The three most important factors that make up a healthy community are low crime/safe neighborhoods (20.9%), good schools (16.1%), and access to health care (13.0%) (Fig 22). Men considered low crime/safe neighborhoods (22.8%), good schools (16.3%) and good jobs and healthy economy (12.7%) as top factors for a healthy community, while women considered low crime/safe neighborhoods (19.5%), good schools (15.6%) and affordable housing (15.0%) as top factors (Fig 23).

Fig 22. Factors Making up a Healthy Community

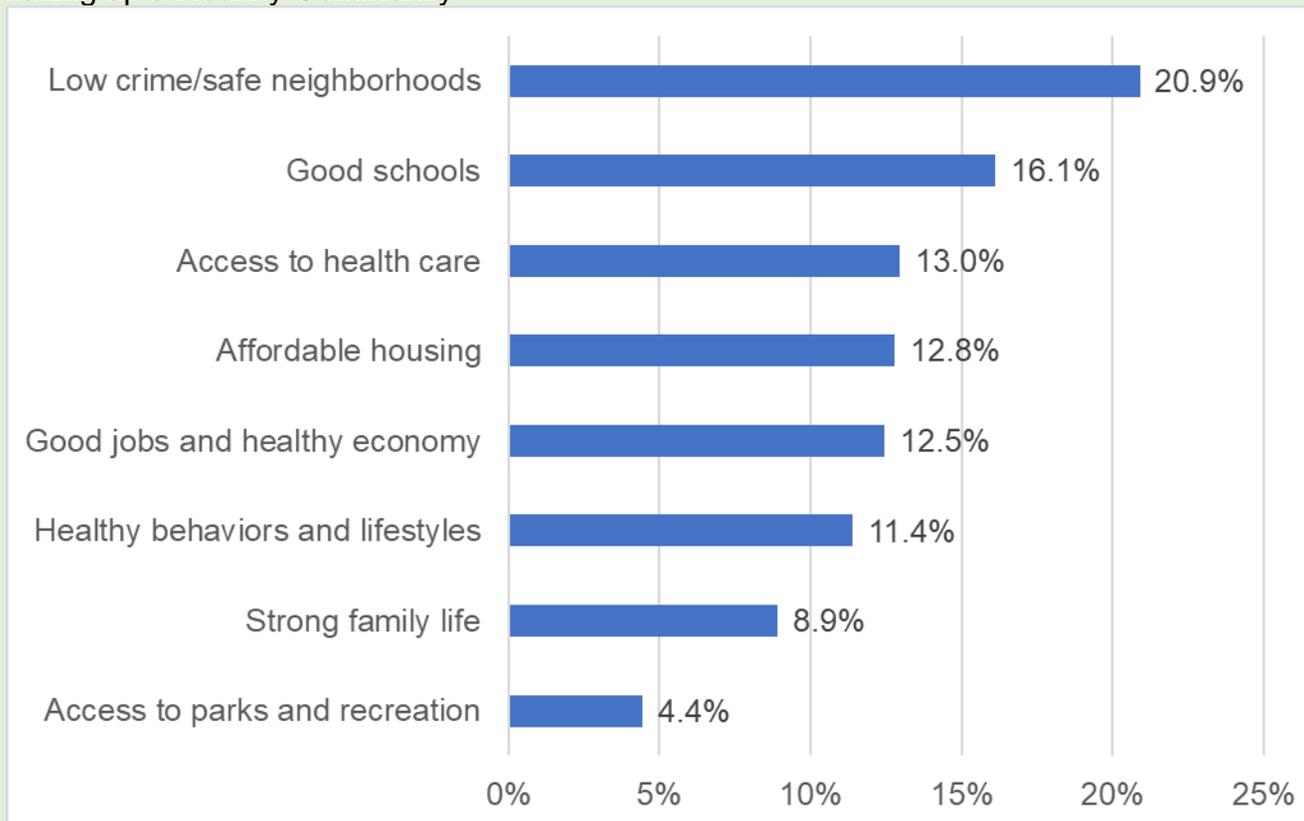
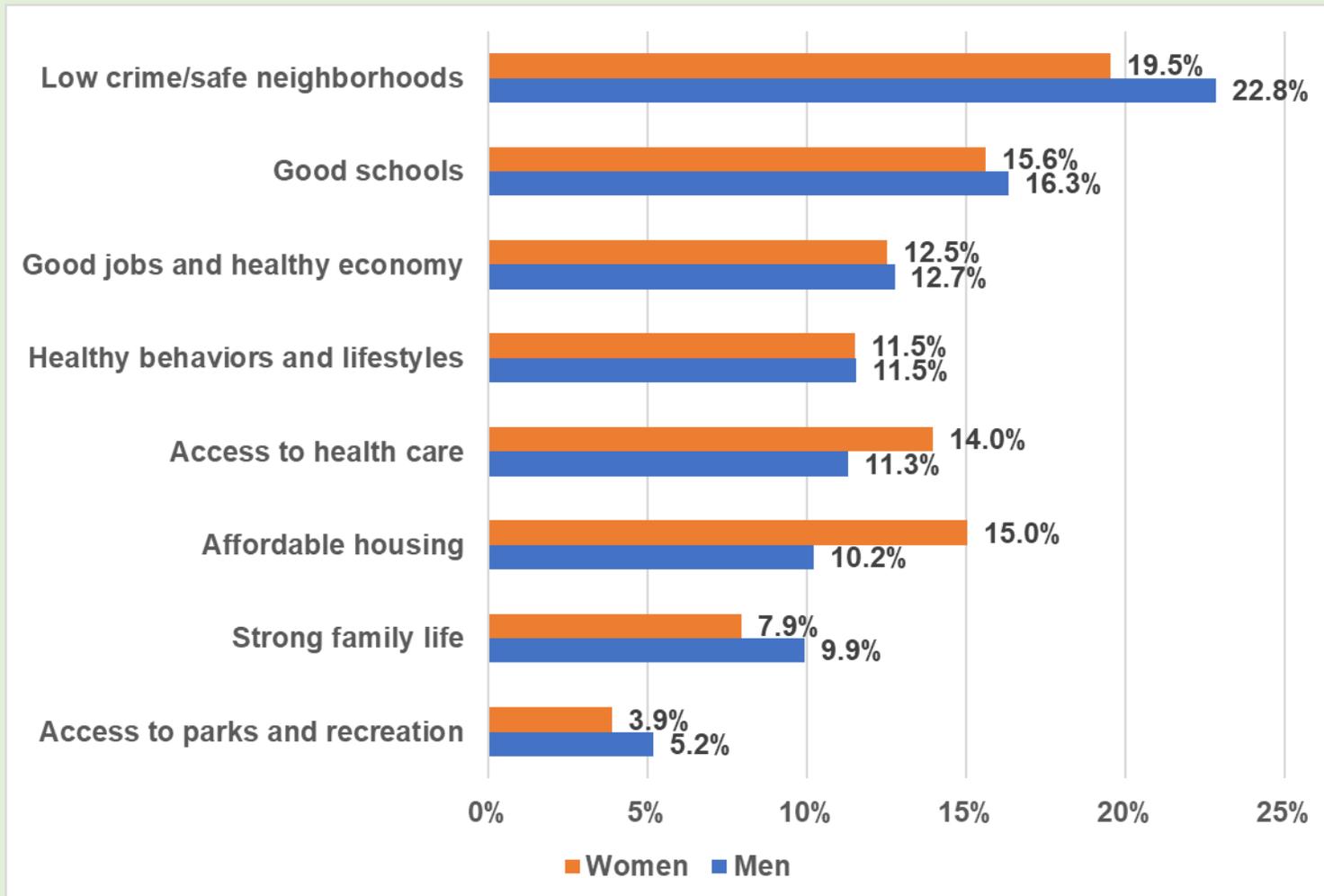


Fig 23. Factors Making up a Healthy Community by Sex



The results of most important factors that make up a healthy community by age are in Fig 24. Adults aged 18 to 35 considered good schools (20.1%), affordable housing (17.6%), and low crime/safe neighborhoods (15.9%) as top factors that make up a healthy community, while adults aged 36 to 64 ranked low crime/safe neighborhoods (22.3%), good schools (14.7%) and good jobs and healthy economy (13.9%). Elderly residents aged 65 and older identified low crime/safe neighborhoods (24.0%), good schools (14.4%) and healthy behaviors and lifestyles (12.4%) as top factors that made up a healthy community.

The results of most important factors that make up a healthy community by race/ethnicity are in Fig 25. The three most important factors that make up a healthy community were low crime/safe neighborhoods (19.7%), good schools (16.6%) and good jobs and healthy economy (14.2%) for white residents; low crime/safe neighborhoods (22.9%), affordable housing (16.6%), and access to healthcare (13.7%) for African American residents; low crime/safe neighborhoods (22.8%), good schools (18.7%) and affordable housing (14.8%) for Hispanic residents; and low crime/safe neighborhoods (26.3%), good schools (17.5%) and healthy behaviors and lifestyles (13.2%) for Asian residents.

Fig 24. Factors Making up a Healthy Community by Age

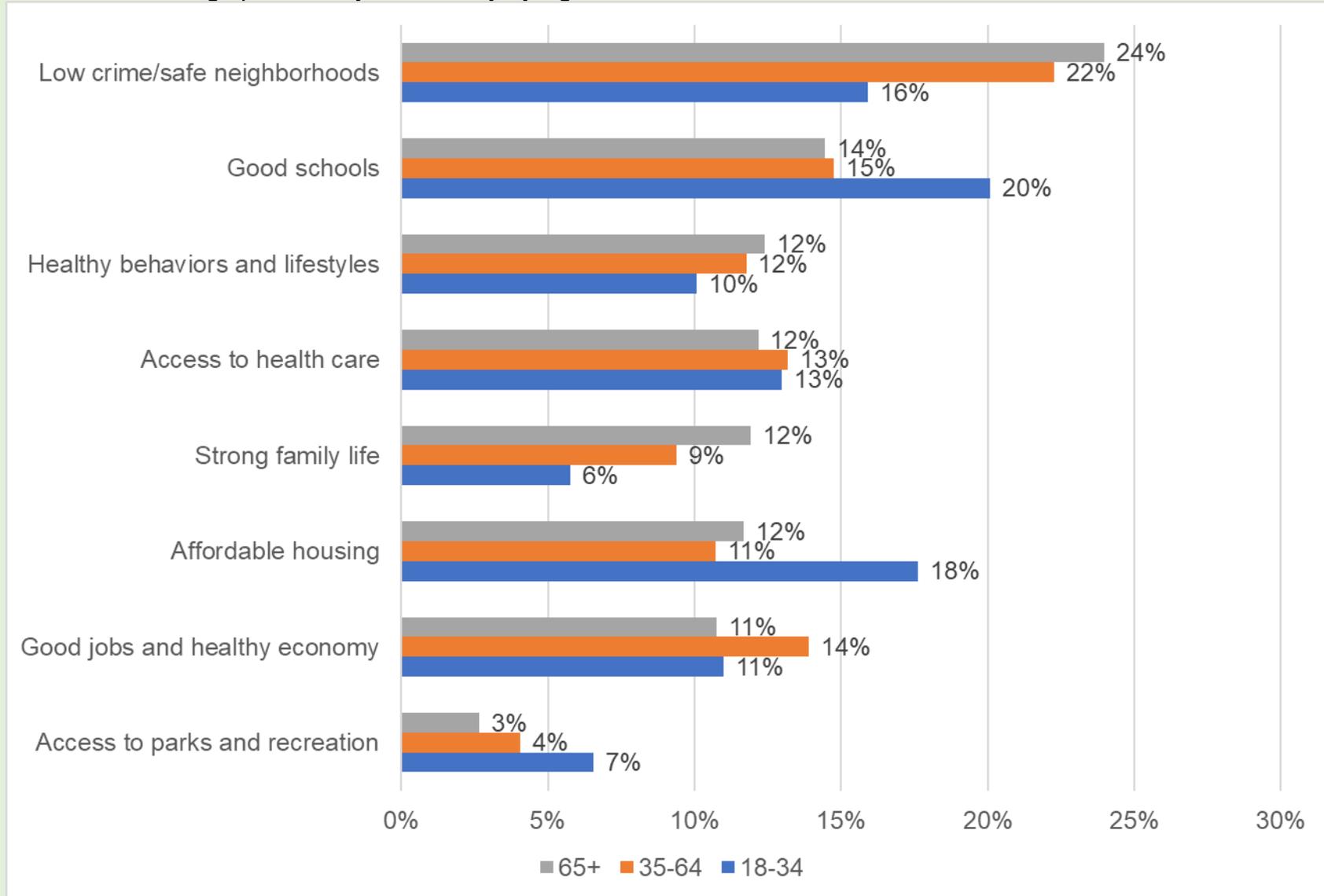
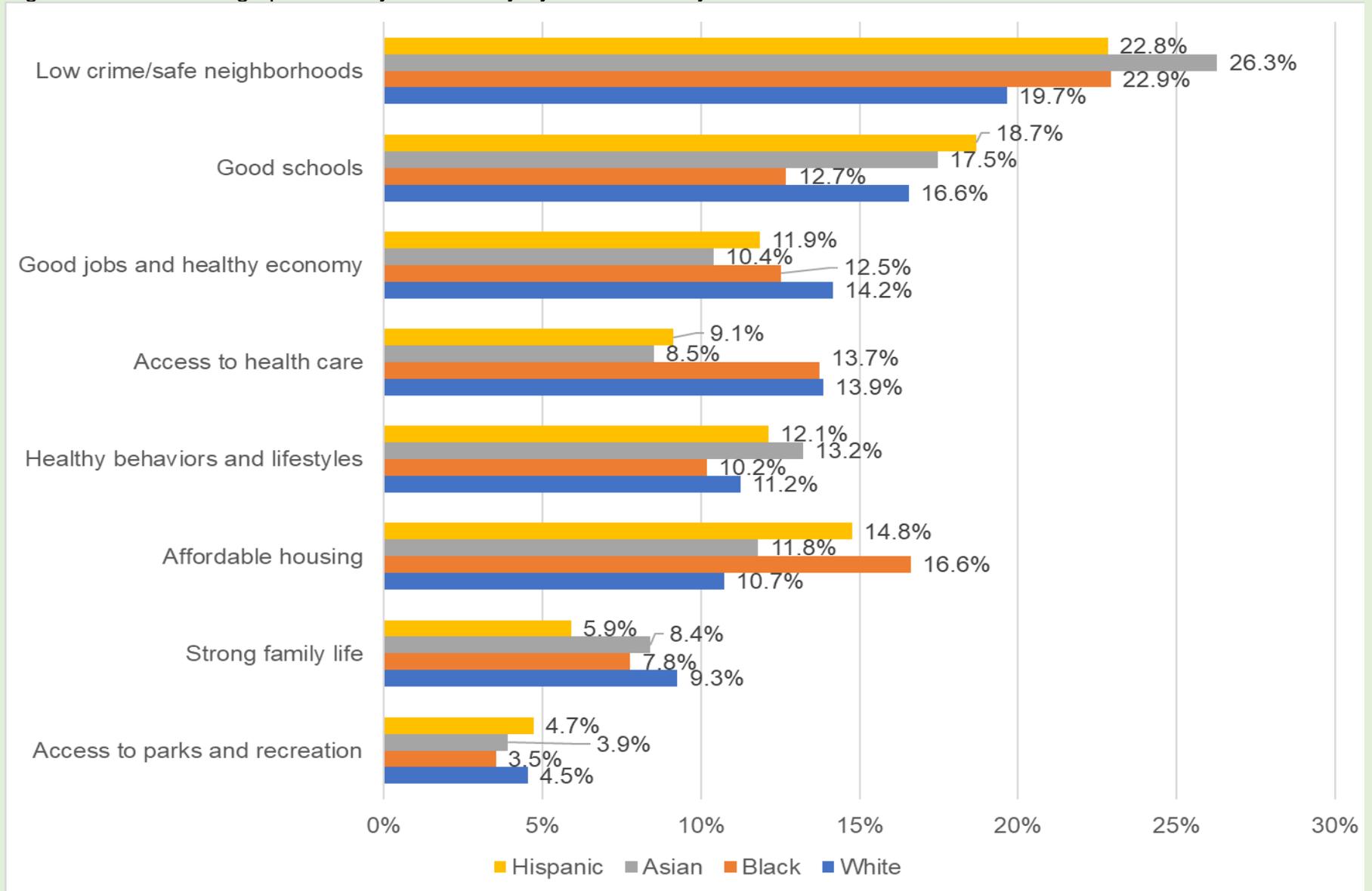


Fig 25. Factors Making up a Healthy Community by Race/ethnicity



The results of most important factors that make up a healthy community by PCSA areas are in Table 5. Though results varied by PCSA area, strong family life and affordable housing are among the top 3 factors across all PCSA areas.

Table 5. Factors Making up a Healthy Community by PCSA Areas

Healthy Community Factors	PCSA Areas			
	Germantown/Gaithersburg/ Pooleville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Strong family life	22.32 (14.92-29.71)	23.29 (17.19-29.40)	18.45 (12.94-23.97)	21.12 (13.74-28.50)
Affordable housing	17.08 (6.95-27.21)	16.56 (11.09-22.03)	15.78 (10.71-20.85)	15.76 (8.68-22.83)
Low crime/safe neighborhoods	13.47 (4.08-22.86)	11.35 (8.32-14.37)	13.45 (8.26-18.64)	13.19 (8.42-17.95)
Good schools	1.76 (0-4.21)	50 (0-10.16)	5.54 (2.54-8.53)	4.46 (2.15-6.78)
Access to health care	15.22 (9.69-20.76)	10.81 (7.46-14.16)	11.86 (7.43-16.30)	14.15 (8.60-19.69)
Access to parks and recreation	11.58 (4.82-18.34)	11.36 (6.39-16.33)	13.49 (9.97-17.02)	12.98 (8.87-17.08)
Healthy behaviors and lifestyles	7.11 (4.95-9.27)	10.93 (6.45-15.41)	8.30 (4.39-12.21)	9.12 (4.35-13.90)
Good jobs and healthy economy	11.47 (7.71-15.22)	10.70 (7.03-14.37)	13.12 (10.67-15.57)	9.23 (4.41-14.04)

* Top 3 are highlighted.

III. Healthcare Access

Reasons not Getting Health Care

Based on the responses from all residents that completed a survey, the three most important reasons that people in the community do not get health care are cost (33.3%), no insurance (24.1%), and wait too long (11.7%) (Fig 26). Both men and women ranked cost, no insurance and wait too long as top reasons for not getting health care (Men: cost – 34.7%, no insurance – 24.9%, wait too long – 12.5%; Women: cost – 32.2%, no insurance – 23.7%, wait too long – 10.8%) (Fig 27).

Fig 26. Reasons not Getting Health Care

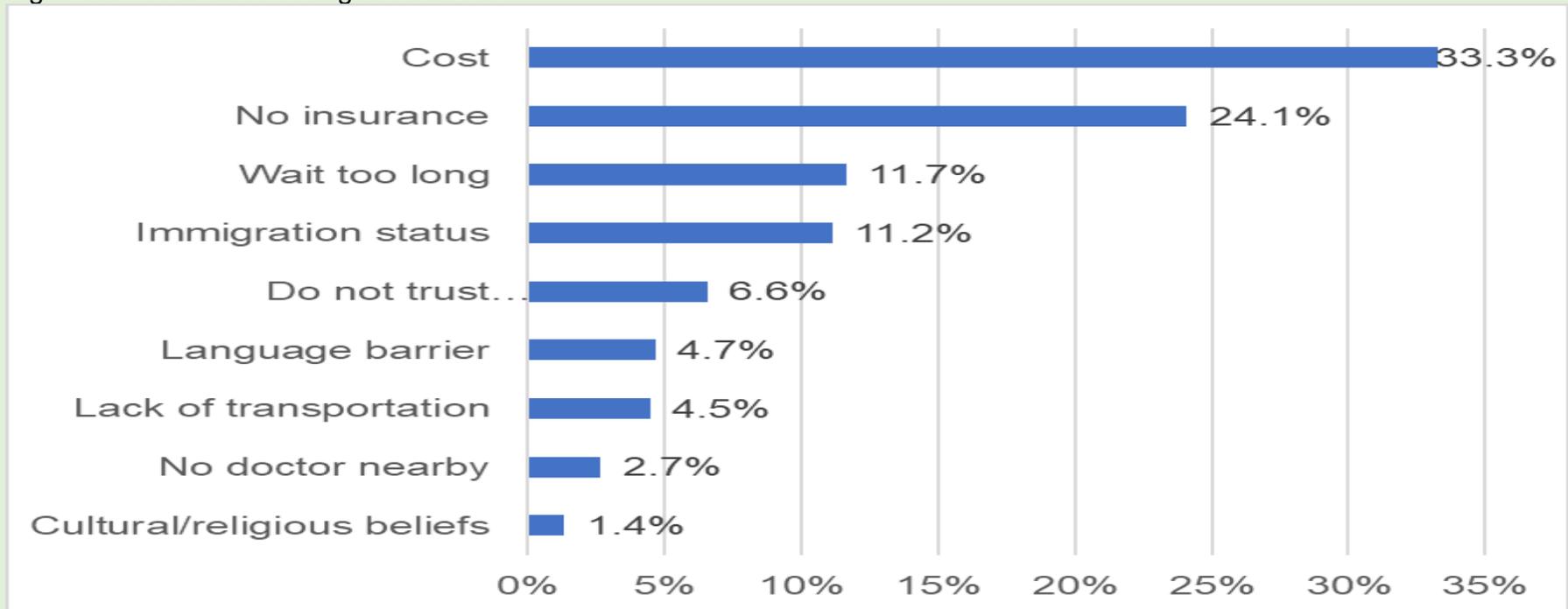
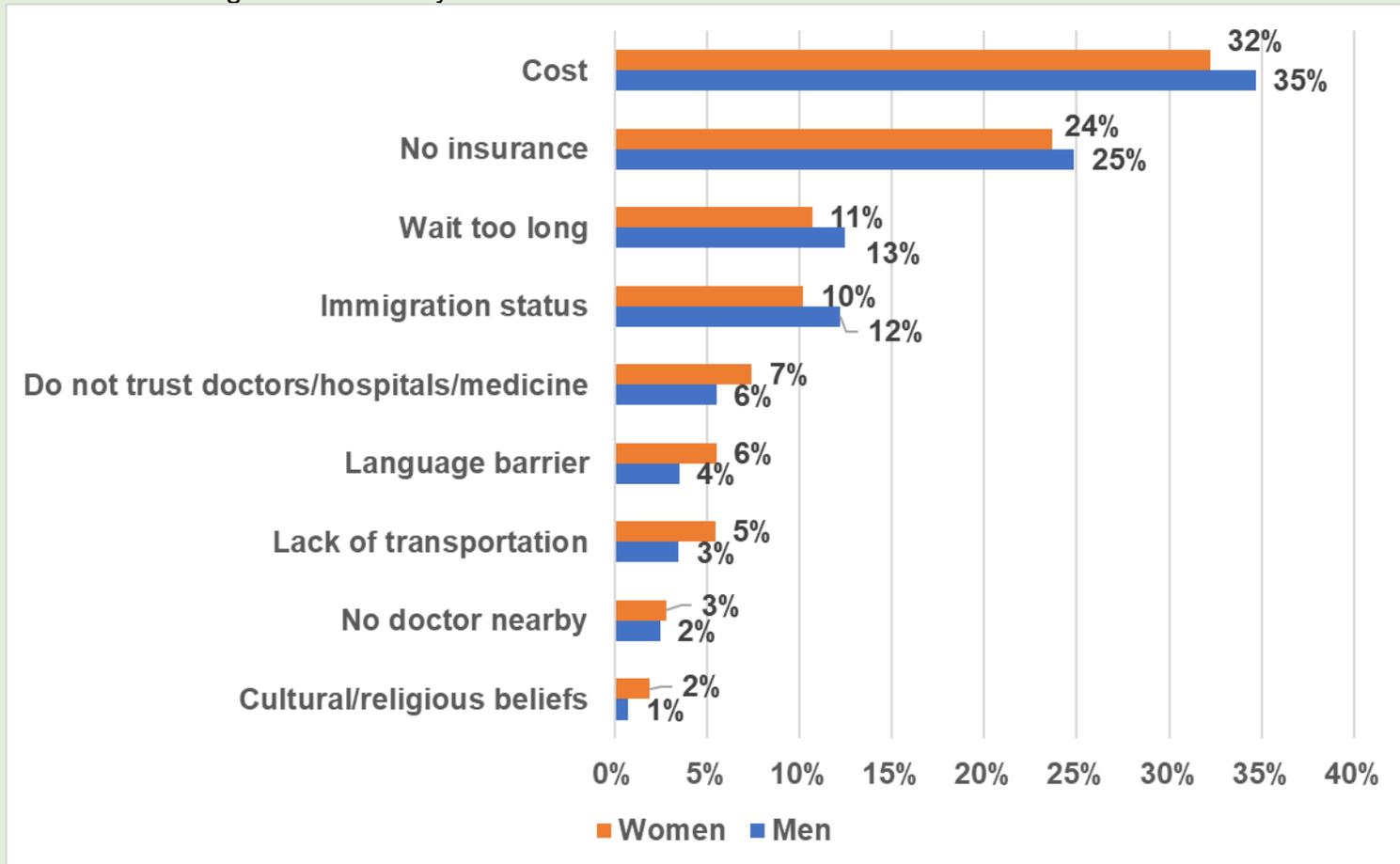


Fig 27. Reasons not Getting Health Care by Sex



Residents aged 18 to 34 that completed the survey ranked cost (33.8%), no insurance (25.0%) and immigration status (13.3%) as top reasons for not getting health care. Residents between ages 35 and 64 identified cost (33.5%), no insurance (24.1%) and way too long (11.4%) as top reasons (Fig 28). White residents that completed the survey identified cost (34.0%), no insurance (25.2%) and wait too long (11.4%) as the top three most important reasons that one does not get health care. African American residents ranked the three top reasons to include cost (32.0%), no insurance (25.3%), and immigration status (9.8%) similar to Hispanic residents (Cost – 30.8%,

no insurance – 21.5%, immigration status – 20.3%). Asian residents identified cost, no insurance and wait too long as key reasons for not getting care (Fig 29).

Fig 28. Reasons not Getting Health Care by Age

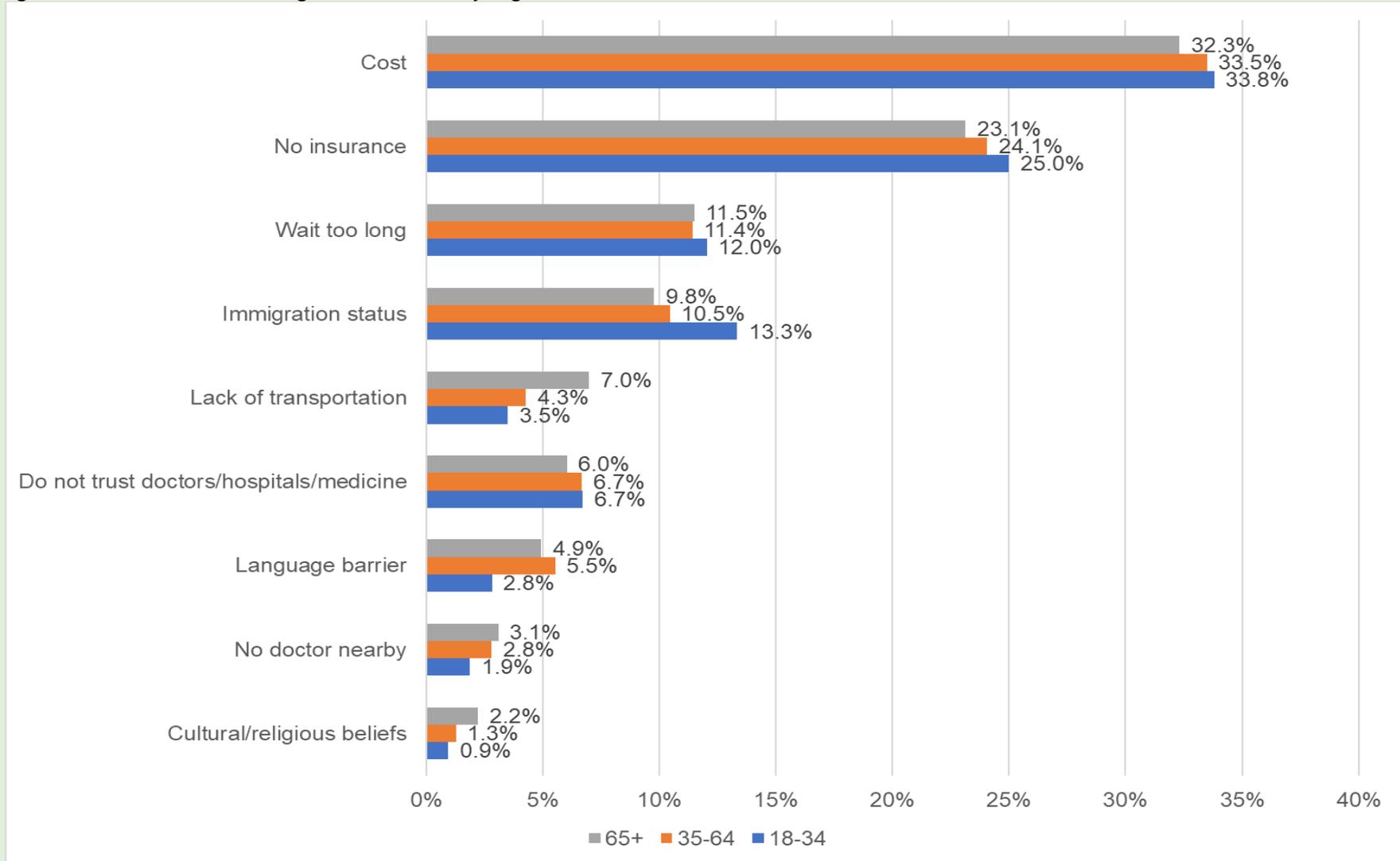
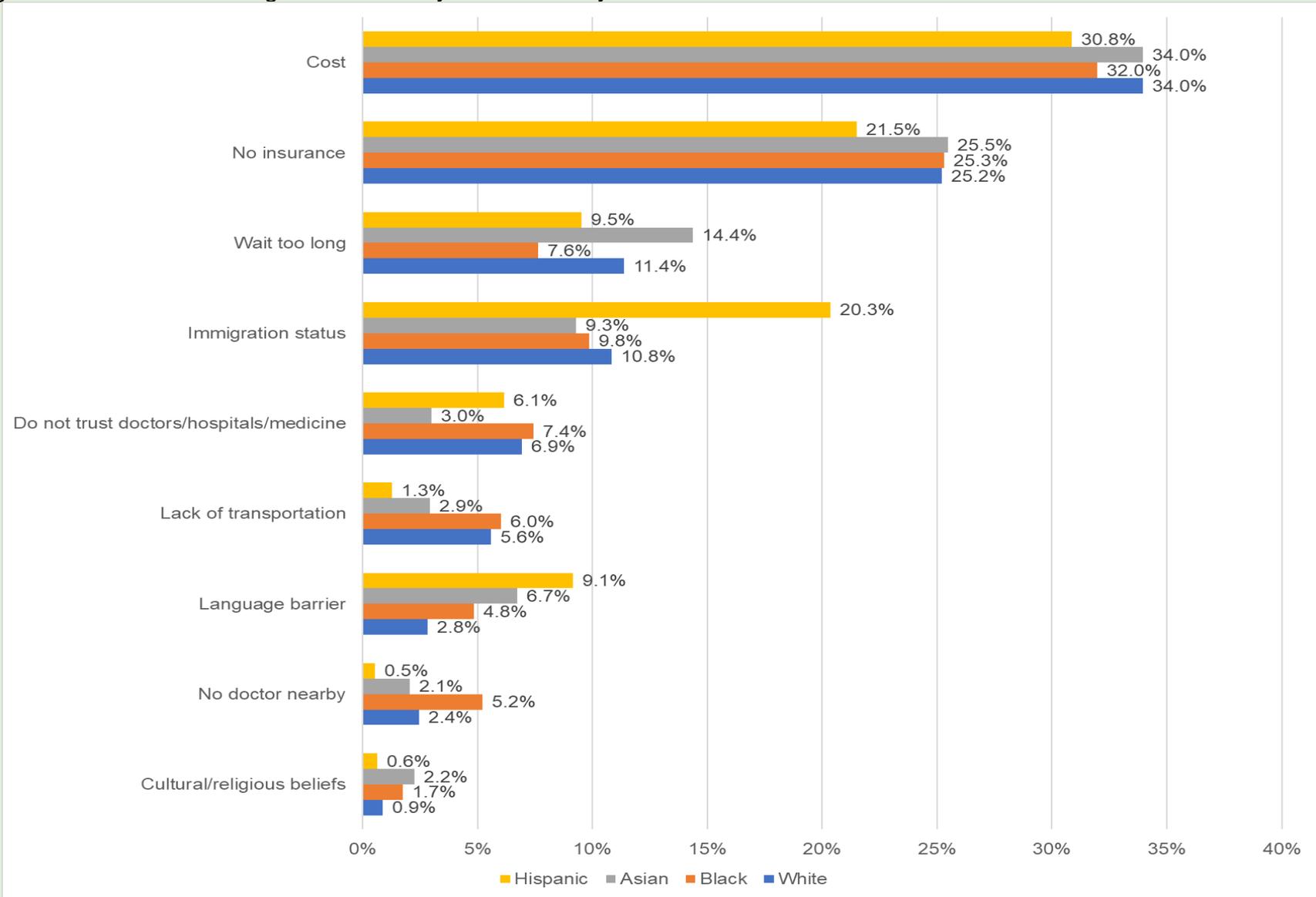


Fig 29. Reasons not Getting Health Care by Race/ethnicity



The results of most important reasons people do not get healthcare by PCSA areas are in Table 6. Though results varied by PCSA area, cost and no insurance are among the top 3 reasons across all PCSA areas.

Table 6. Reasons not Getting Health Care by PCSA Areas

Reason for Not Getting Healthcare	PCSA Areas			
	Germantown/Gaithersburg/ Pooleville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Cost	34.21 (20.97-47.44)	28.73 (17.11-40.36)	36.51 (30.22-42.80)	32.76 (23.64-41.88)
No insurance	25.33 (13.73-36.92)	26.14 (19.77-32.51)	22.24 (14.53-29.95)	23.49 (18.92-28.05)
Lack of transportation	4.10 (0-8.29)	4.76 (1.44-8.09)	4.82 (2.18-7.46)	4.22 (1.55-6.89)
Language barrier	3.75 (.18-7.33)	5.73 (2.11-9.36)	3.92 (1.77-6.06)	5.63 (1.46-9.81)
Wait too long	8.63 (3.82-13.44)	11.78 (3.93-19.63)	14.41 (9.39-19.44)	10.09 (5.90-14.29)
No doctor nearby	4.45 (1.51-7.39)	1.89 (.43-3.36)	2.23 (.36-4.09)	2.58 (.61-4.56)
Do not trust doctors/hospitals/medicine	4.36 (2.78-5.94)	8.19 (5.68-10.70)	7.66 (3.07-12.24)	5.27 (2.25-8.29)
Cultural/religious beliefs	1.29 (.07-2.52)	.93 (.44-1.42)	.50 (0-1.13)	3.12 (0-6.86)
Immigration status	13.88 (5.16-22.60)	11.83 (5.89-17.77)	7.72 (2.01-13.43)	12.84 (4.72-20.95)

* Top 3 are highlighted.

Health Insurance Status

55% of respondents have health insurance through their employer. 23.3% of respondents have Medicare/Medicaid/Government sponsored health insurance. 12.1% of respondents self-purchased health insurance and 9.6% of respondents do not have health insurance/ pay cash (Fig 30). 12.8% of men are uninsured while 6.6% of women are uninsured (Fig 31).

Fig 30. Health Insurance Status

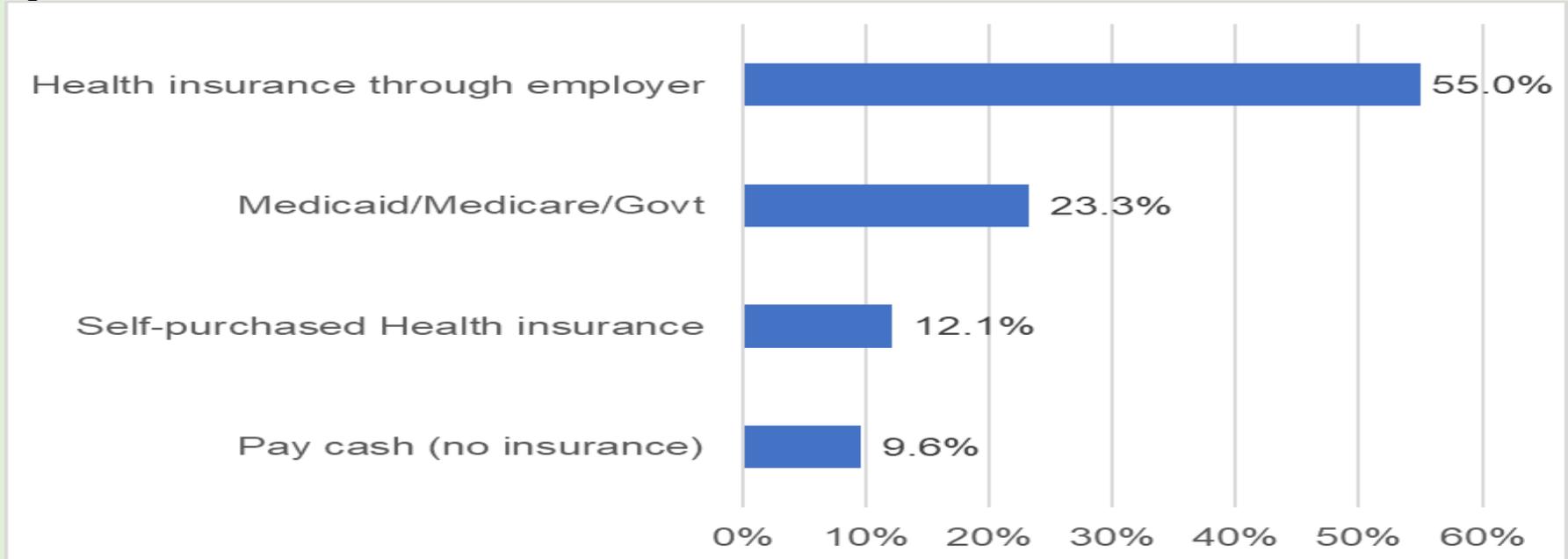
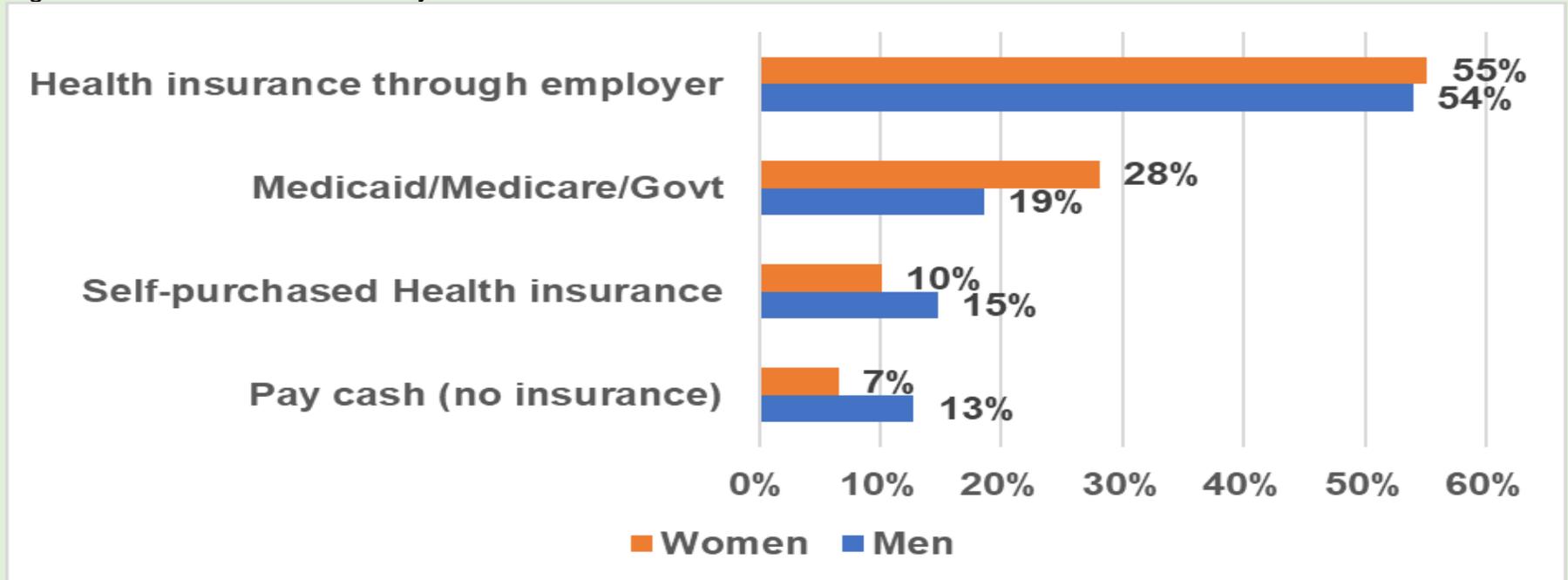


Fig 31. Health Insurance Status by Sex



16.5% of adults aged 18 to 34 are uninsured compared to 8.8% of adults aged 35 to 64 and 4% of elderly residents aged 65 and older (Fig 32). 7.8% of White residents are uninsured compared to 9.7% of African American residents, 12.5% of Hispanic residents and 6.6% of Asian residents (Fig 33).

Fig 32. Health Insurance Status by Age

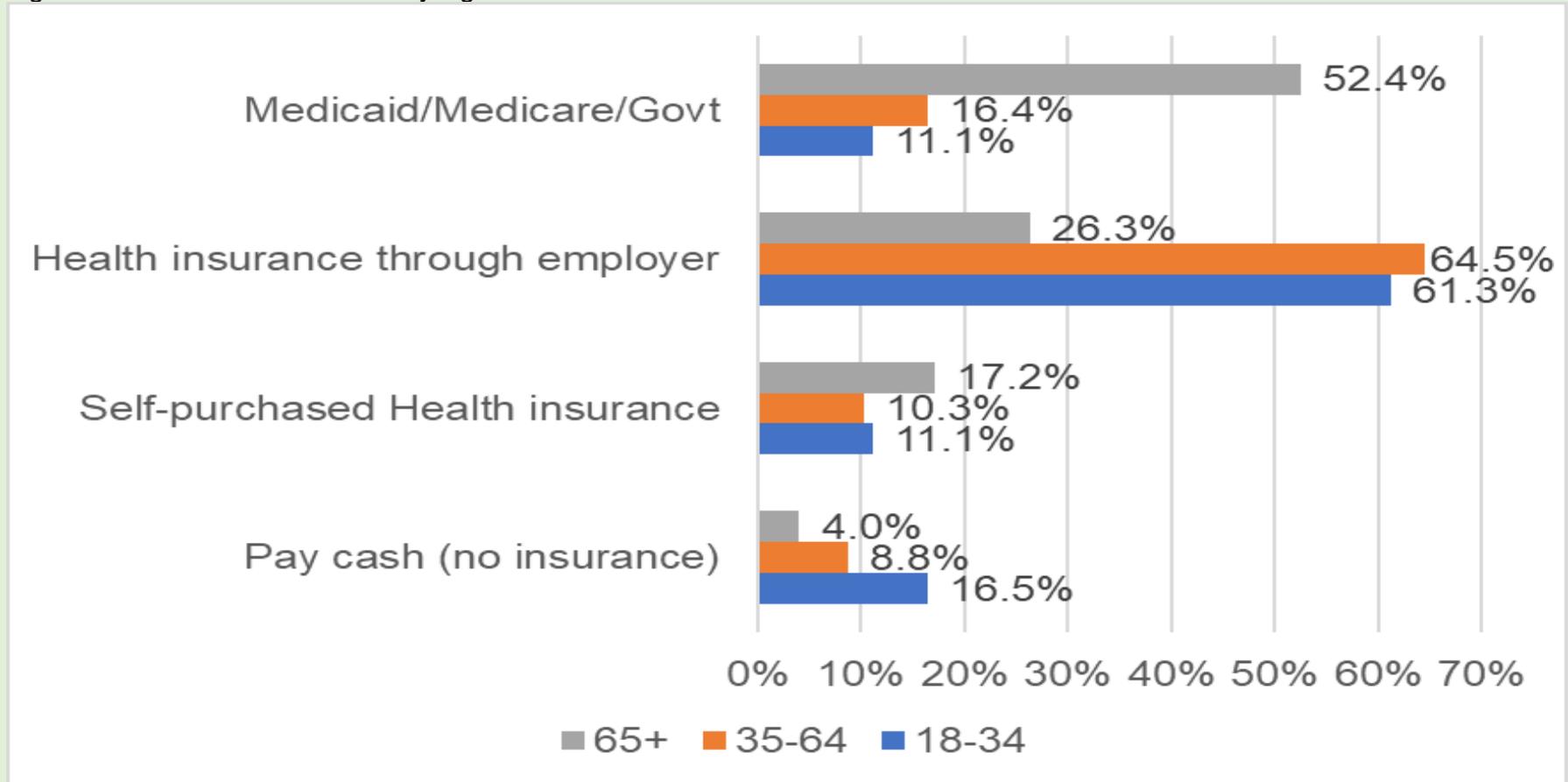
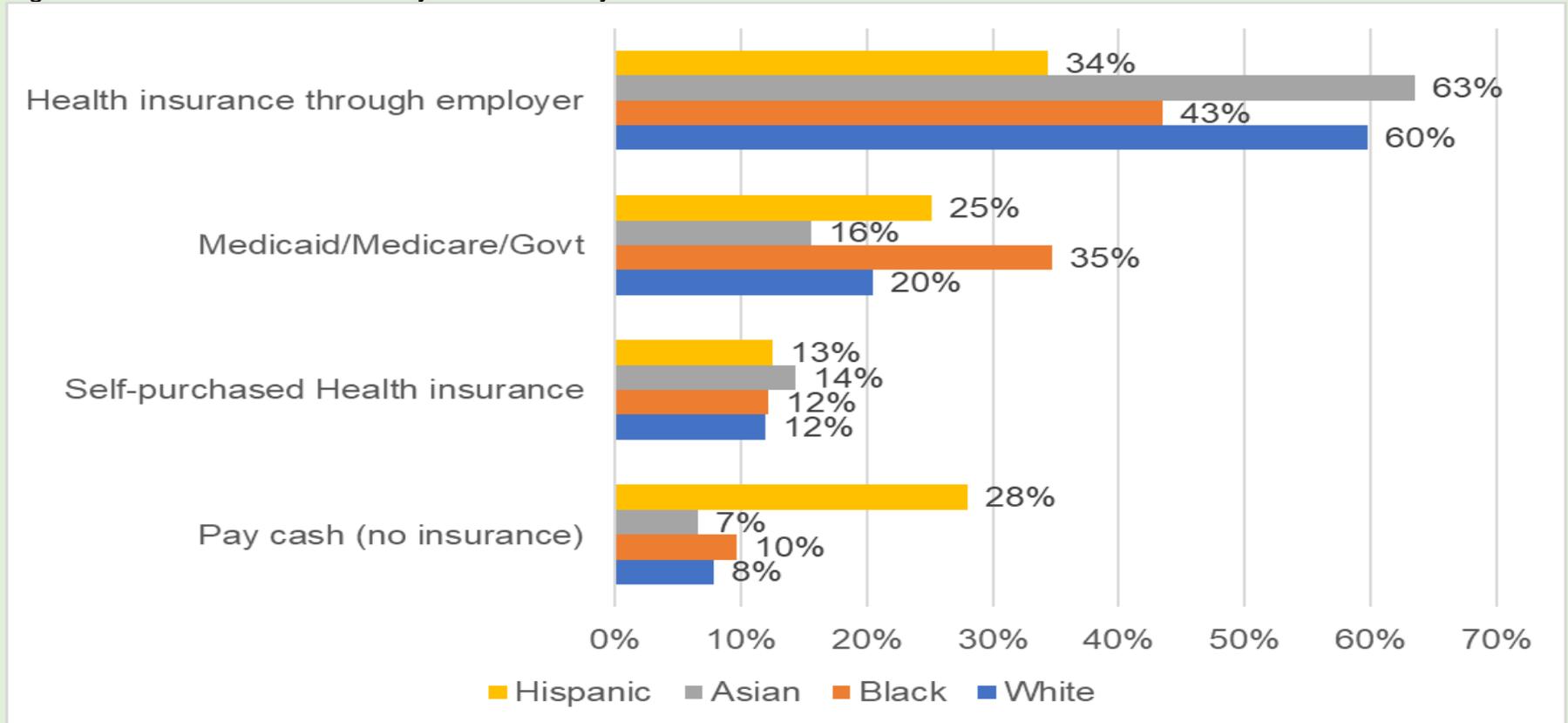


Fig 33. Health Insurance Status by Race/ethnicity



The results of health insurance status by PCSA areas are in Table 7. Though results varied by PCSA area, health insurance through employer and Medicaid/Medicare/Govt are among the top 2 sources across all PCSA areas.

Table 7. Health Insurance Status by PCSA Areas

How do you pay for health care?	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Pay cash (no insurance)	17.46 (9.61-25.30)	11.31 (1.82-20.79)	60 (3.02-8.98)	6.05 (2.70-9.41)
Health insurance through employer	47.70 (29.99-65.40)	49.65 (33.02-66.27)	63.74 (50.27-77.21)	53.33 (36.74-69.92)
Self-purchased Health insurance	13.37 (0-27.03)	11.64 (6.32-16.95)	9.57 (4.57-14.58)	15.67 (7.53-23.81)
Medicaid/Medicare/Govt	21.48 (13.65-29.30)	27.41 (17.92-36.90)	20.69 (14.53-26.85)	24.95 (16.31-33.58)

Healthcare Provider Visits

76.4% of respondents visited the doctor or other healthcare provider for a routine checkup within the last year (95% CI: 71.6-81.3) (Fig 34). 5.4% of men had a routine checkup or doctor's visit 5 or more years ago compared to 5.7% of women (Fig 35).

Fig 34. Healthcare Provider Visits

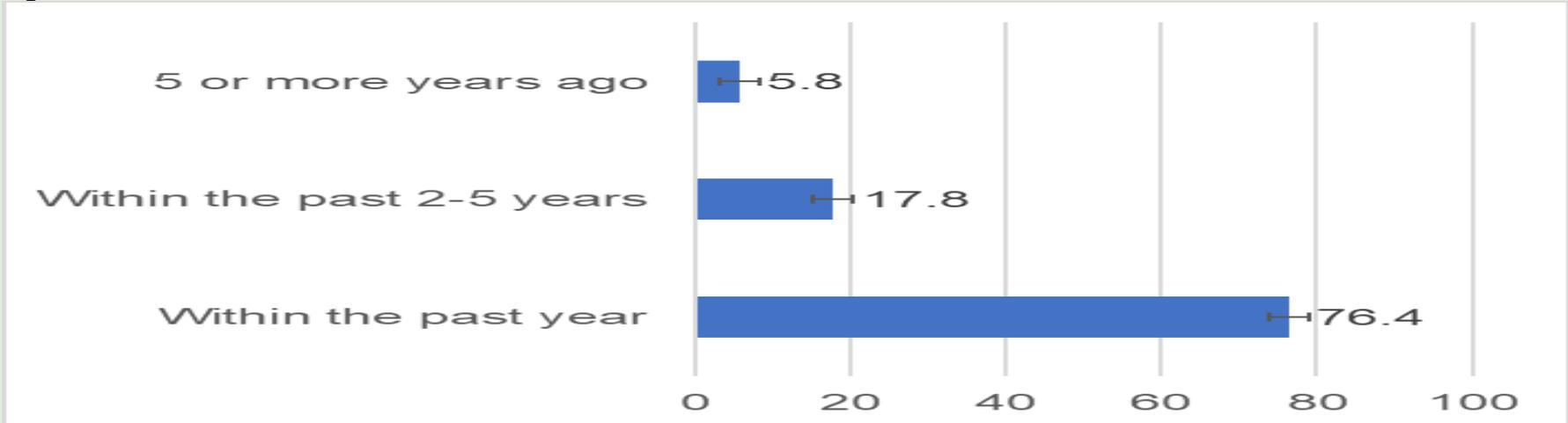
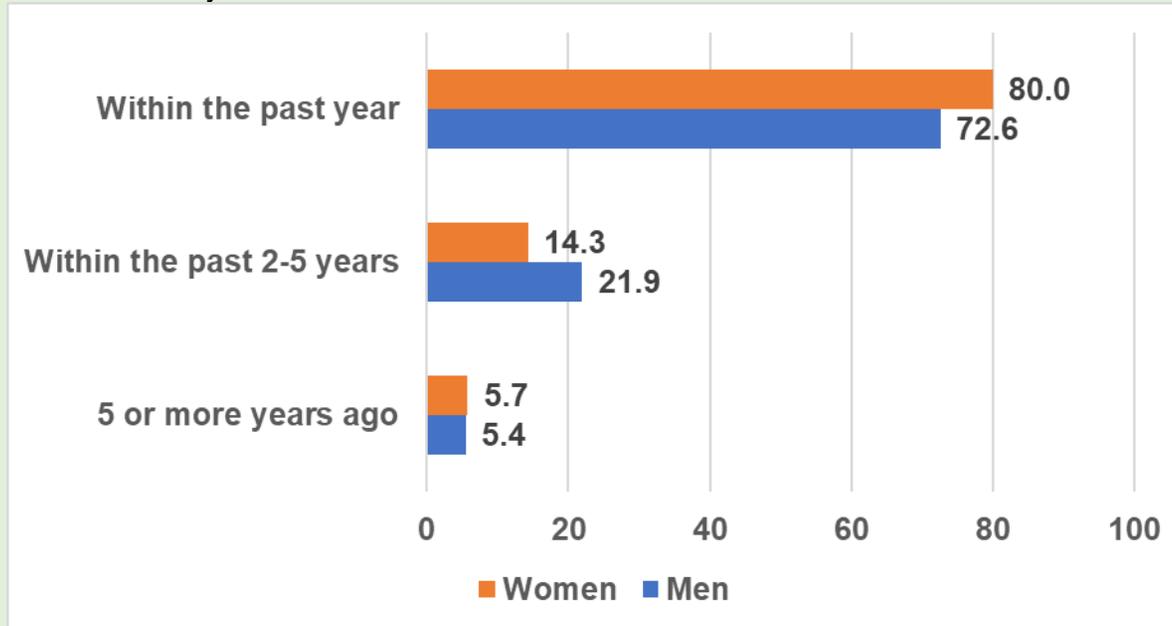


Fig 35. Healthcare Provider Visits by Sex



12.3% of adults aged 18 to 34 had a routine checkup or doctor’s visit 5 or more years ago, compared to 4% of adults aged 35 and 64 and 1.5% of those 65 years and older (Fig 36). 5.2% of White residents had a routine checkup or doctor’s visit 5 or more years ago, compared to 3.8% of African Americans, 15.1% of Hispanics and 2.3% of Asians (Fig 37).

Fig 36. Healthcare Provider Visits by Age

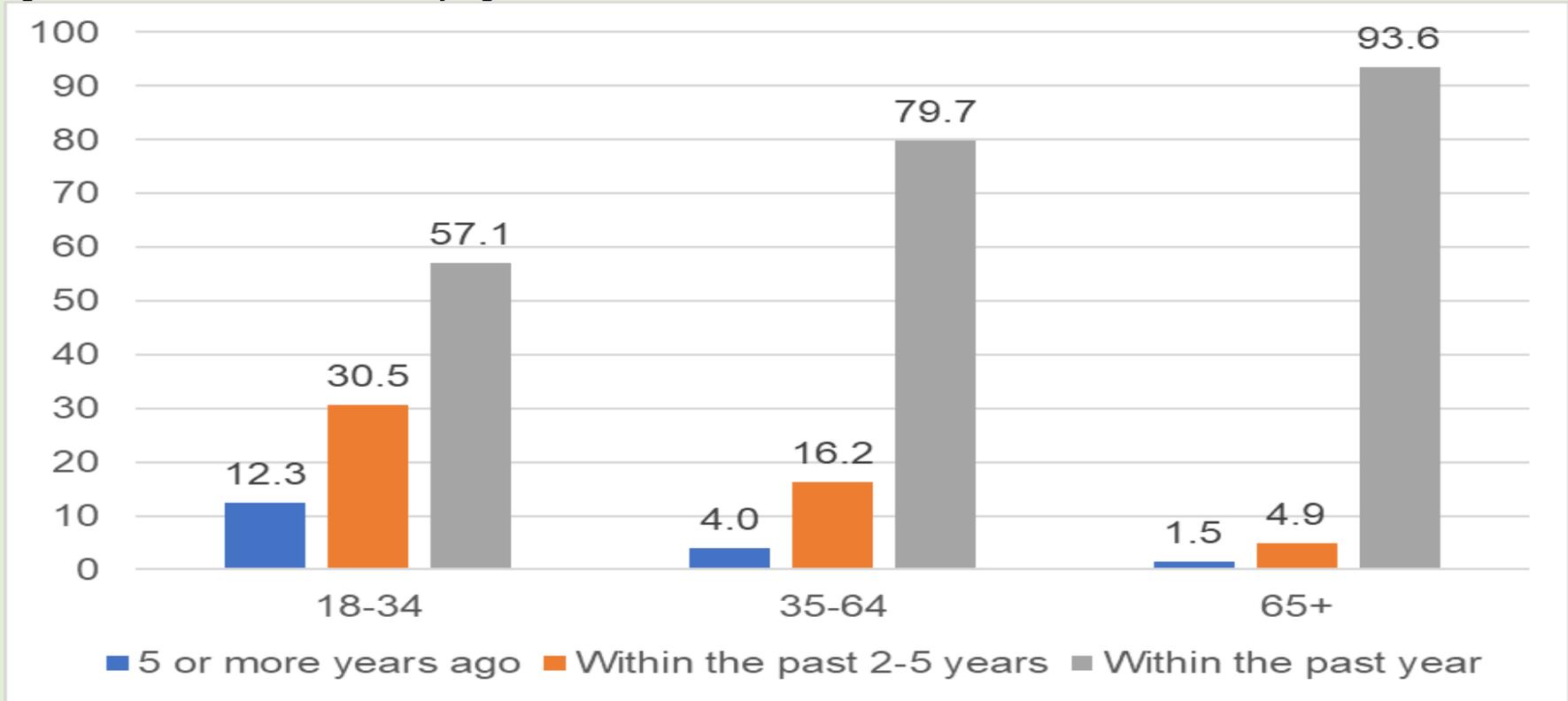
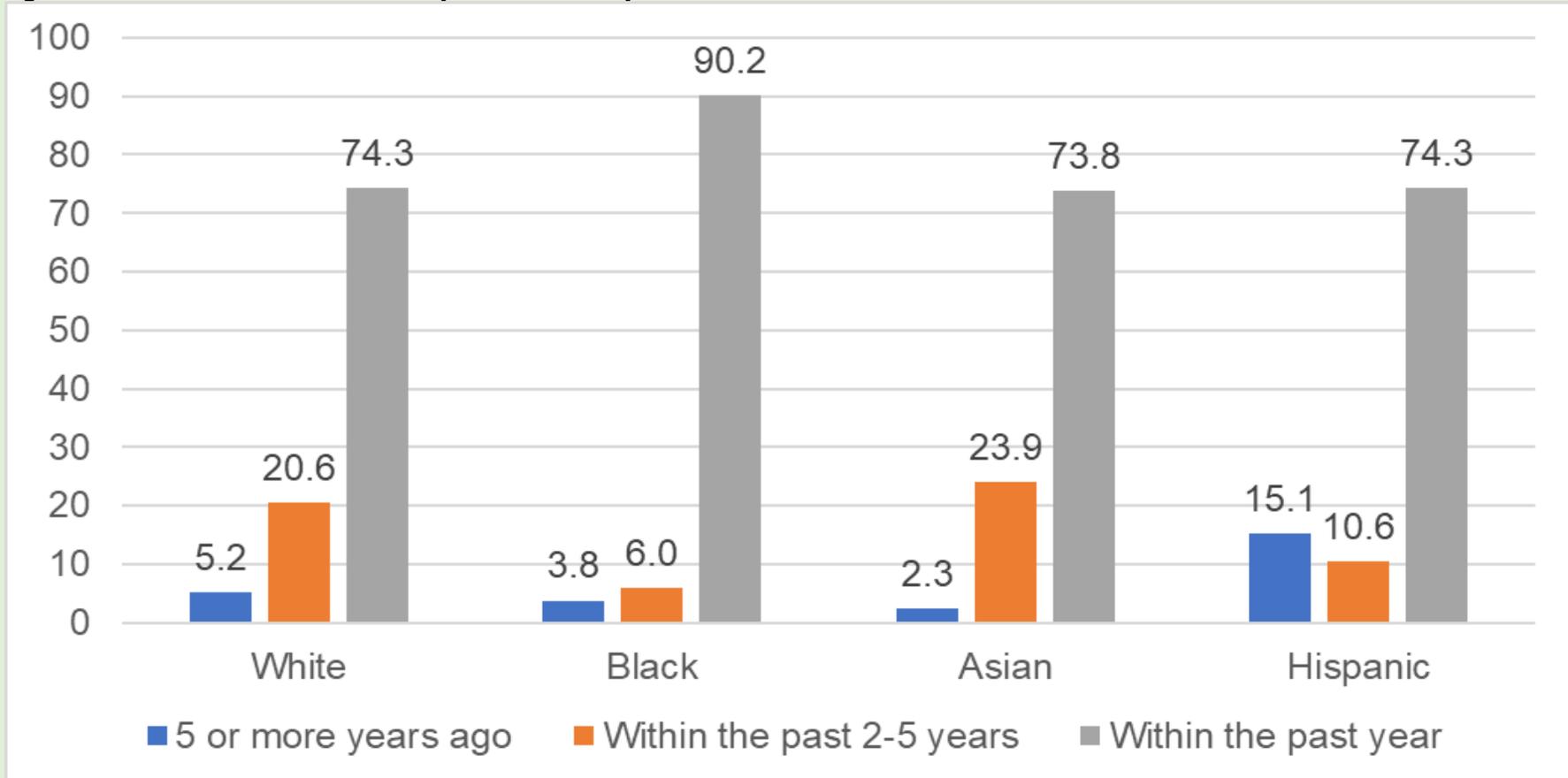


Fig 37. Healthcare Provider Visits by Race/ethnicity



The results of last healthcare provider visits by PCSA areas are in Table 8. Though results varied by PCSA area, healthcare provider visit within past year is the most frequency across all PCSA areas.

Table 8. Healthcare Provider Visits by PCSA Areas

Last healthcare provider visits	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Within the past year	69.8 (55.24 -84.34)	75.3 (65.28 -85.38)	79.5 (70.14 -88.86)	78.3 (71.86 -84.79)
Within the past 2-5 years	19.3 (9.85 -28.81)	17.3 (5.37 -29.23)	18.1 (7.42 -28.69)	16.5 (8.89 -24.17)
5 or more years ago	10.9 (0 -25.09)	7.4 (0 -22.71)	2.4 (0 -6.41)	5.1 (0 -12.98)

PCP Availability

75.9% of respondents have a personal doctor or healthcare provider (95% CI: 69.5-82.3) (Fig 38). More than 75% of both men and women have one person as a personal doctor or healthcare provider (Fig 39).

Fig 38. PCP Availability

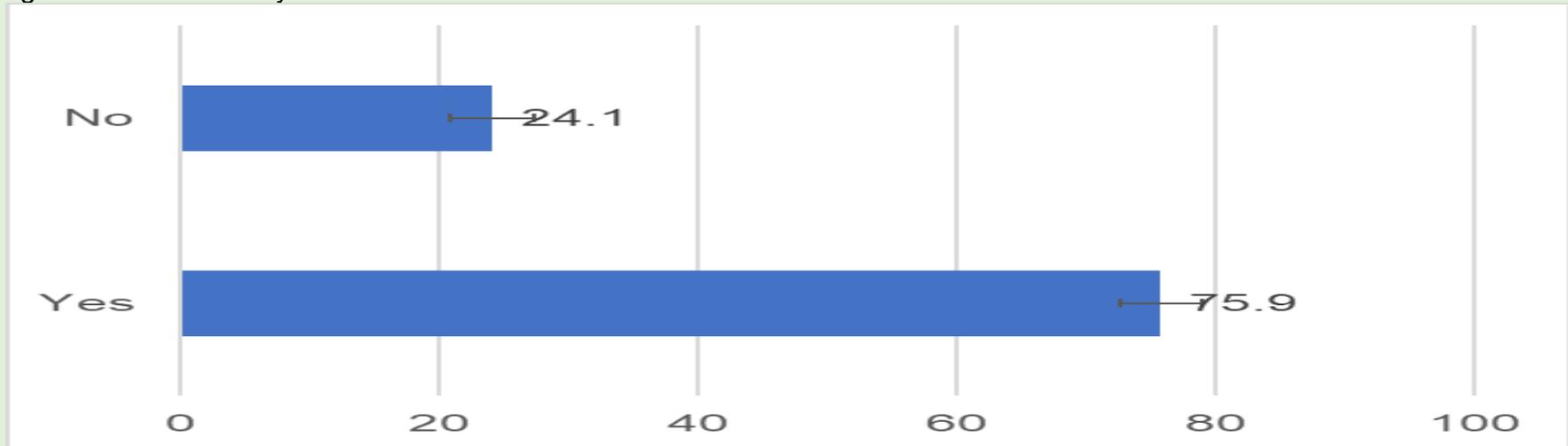
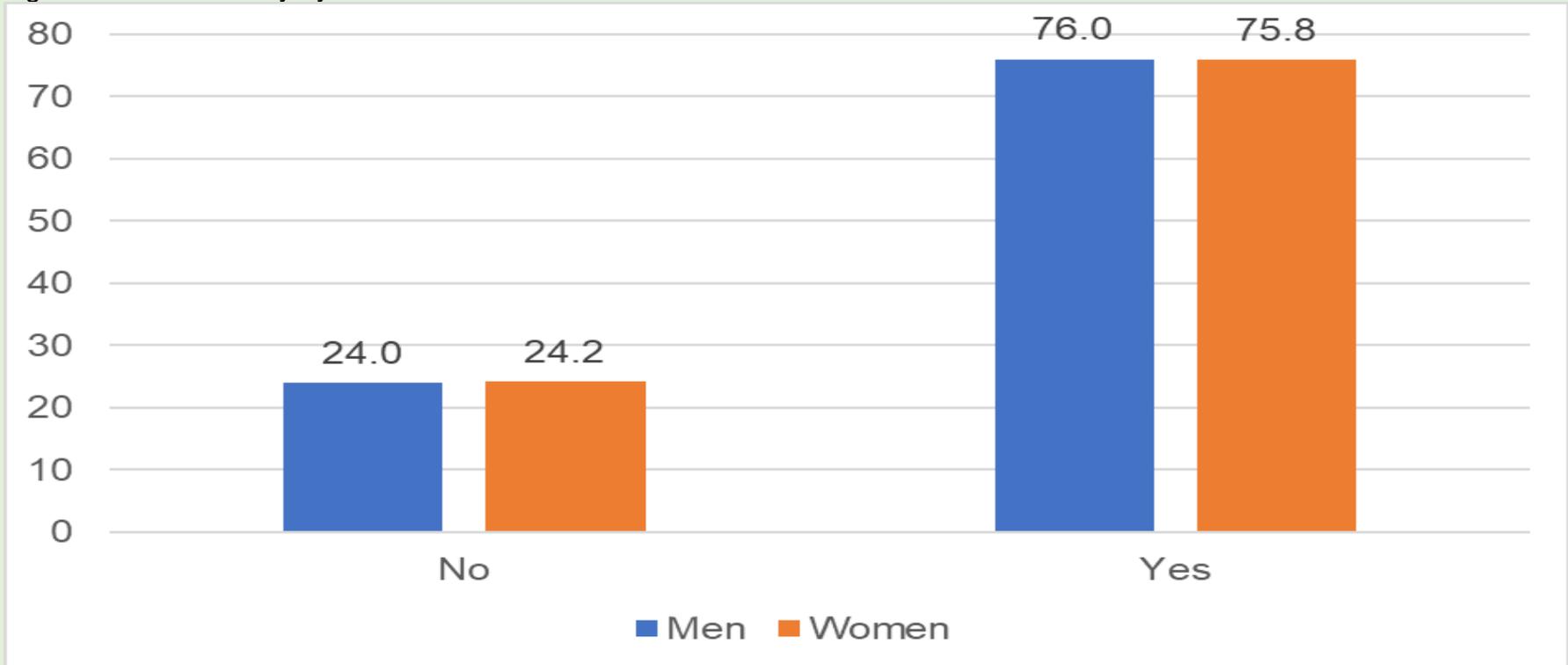


Fig 39. PCP Availability by Sex



Those between 18 and 34 are least likely to have a personal doctor or healthcare provider (Fig 40). Hispanics are least likely to have a personal doctor or healthcare provider (Fig 41).

Fig 40. PCP Availability by Age

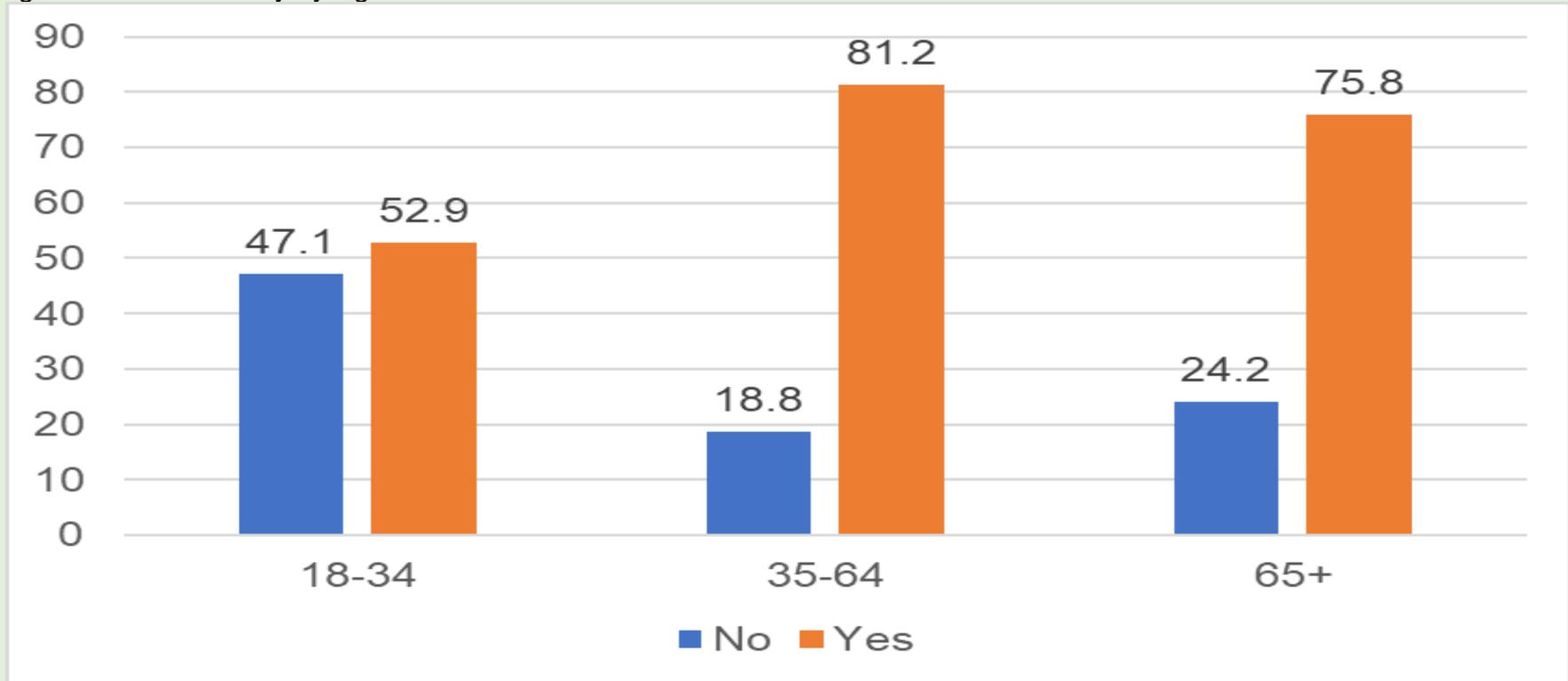
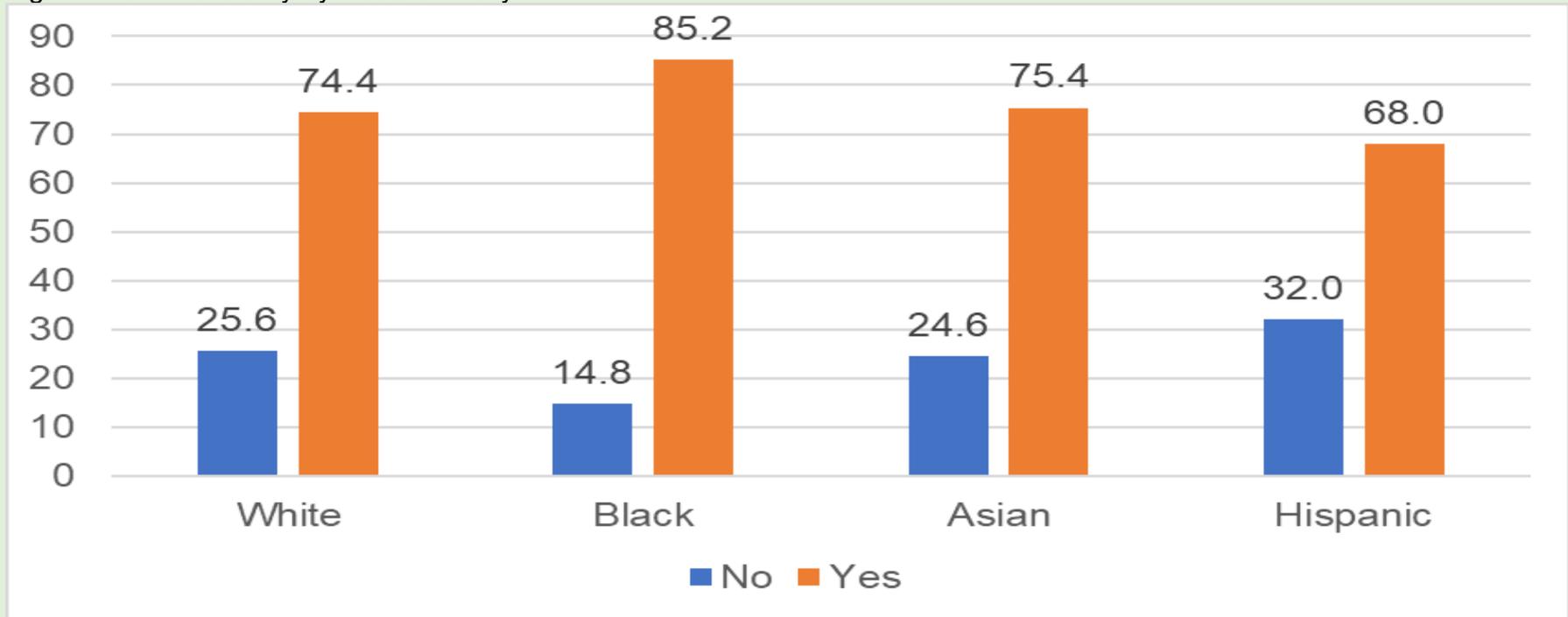


Fig 41. PCP Availability by Race/ethnicity



The results of last healthcare provider visits by PCSA areas are in Table 9.

Table 9. PCP Availability by PCSA Areas

PCP availability	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Yes	71.0 (55.84-86.14)	77.8 (61.34 -94.21)	79.4 (70.73 -88.03)	72.4 (60.85 -83.91)
No	29.0 (13.86 -44.16)	22.2 (5.79 -38.66)	20.6 (11.97 -29.27)	27.6 (16.09 -39.15)

IV. Impact from COVID-19

COVID-19 Experience in the Family

In June 2022, 52.3% of all residents that completed the survey indicated a family member or friend outside their household has been diagnosed with COVID-19. 22.8% of respondents indicated that a household member has been diagnosed with COVID-19. 20.2% of respondents have been diagnosed with COVID-19 themselves. 4.6% of respondents don't know anyone diagnosed with COVID-19 (Fig. 42). The results by sex varied and are presented in Fig 43, family member/friend diagnosed with COVID-19 was the most experience among both men and women.

Fig 42. COVID-19 Experience in the Family

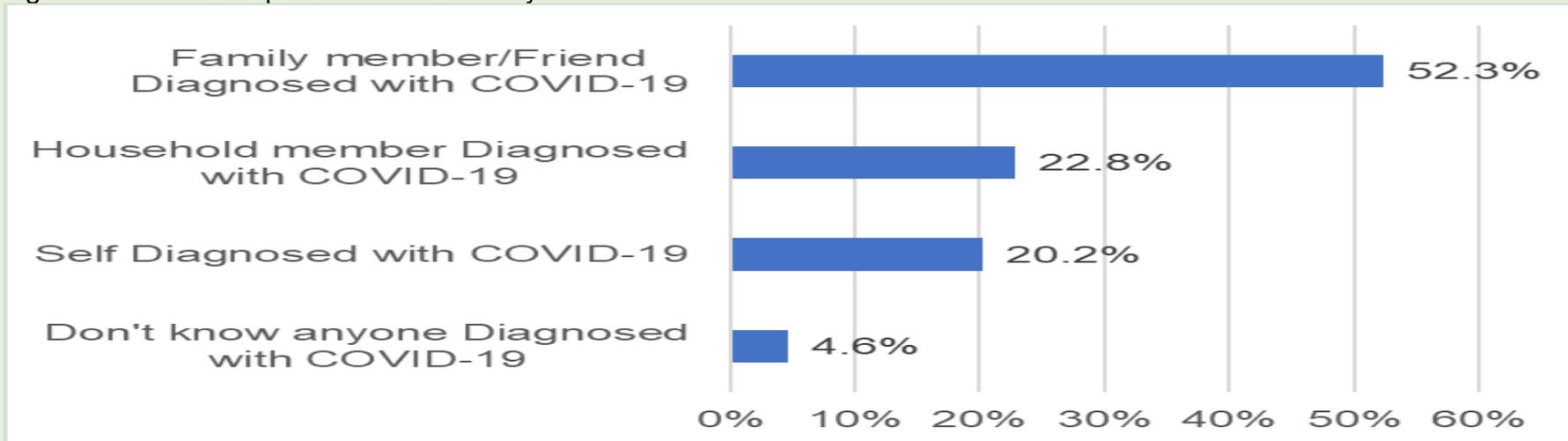
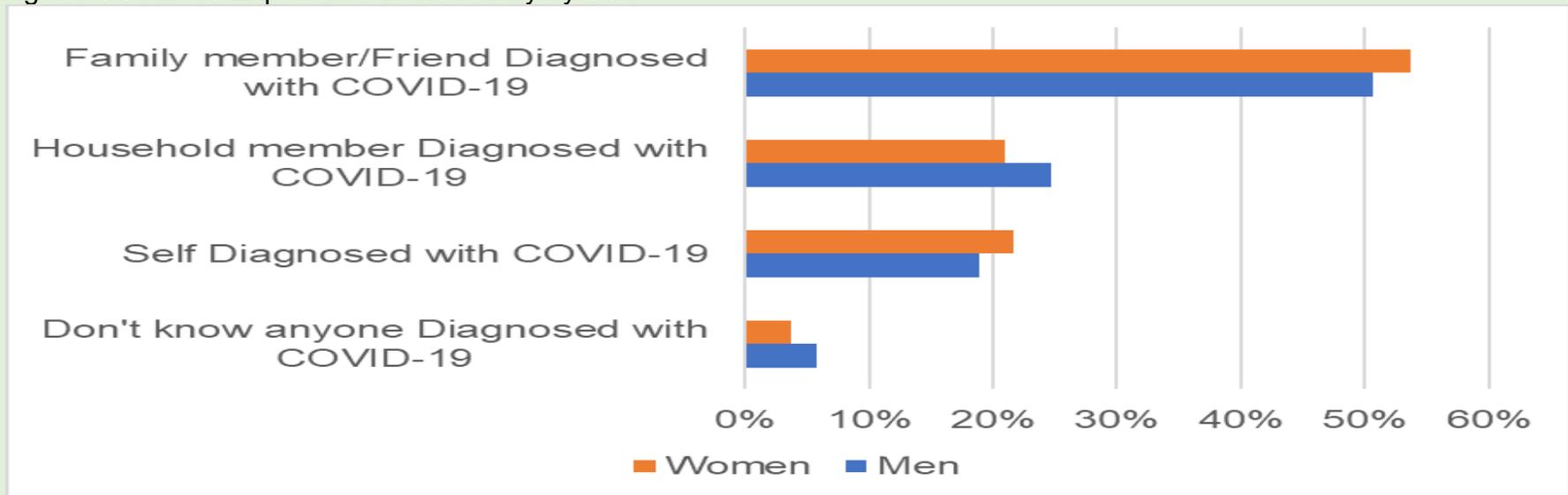


Fig 43. COVID-19 Experience in the Family by Sex



The results by age and by race/ethnicity varied and are presented in Fig 43, family member/friend diagnosed with COVID-19 was the most experience across population subgroups.

Fig 44. COVID-19 Experience in the Family by Age

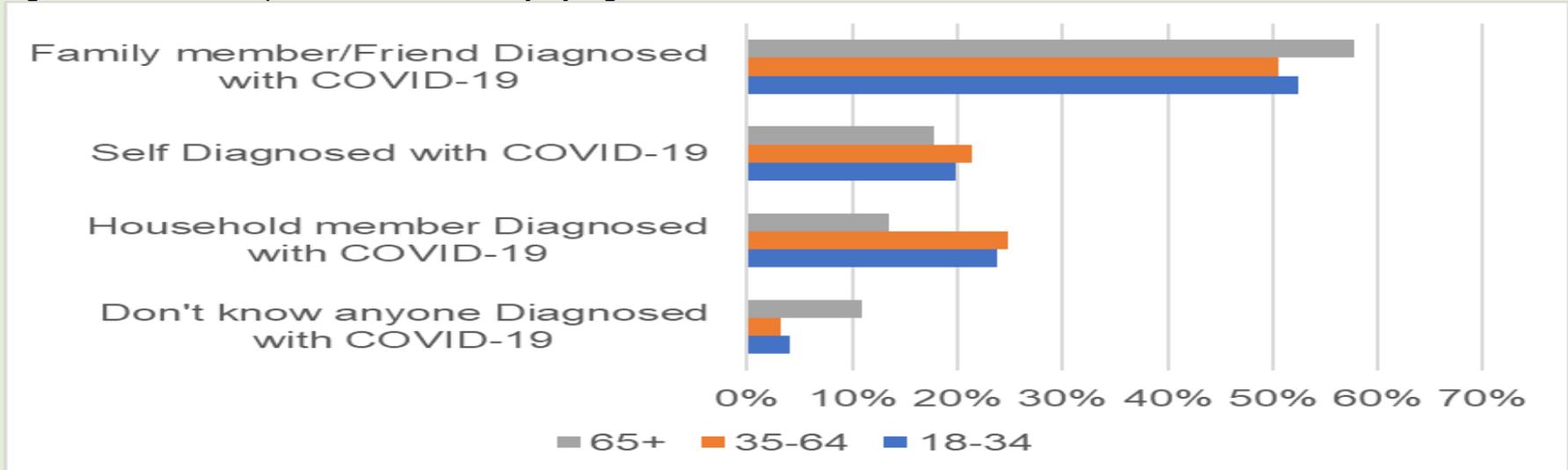
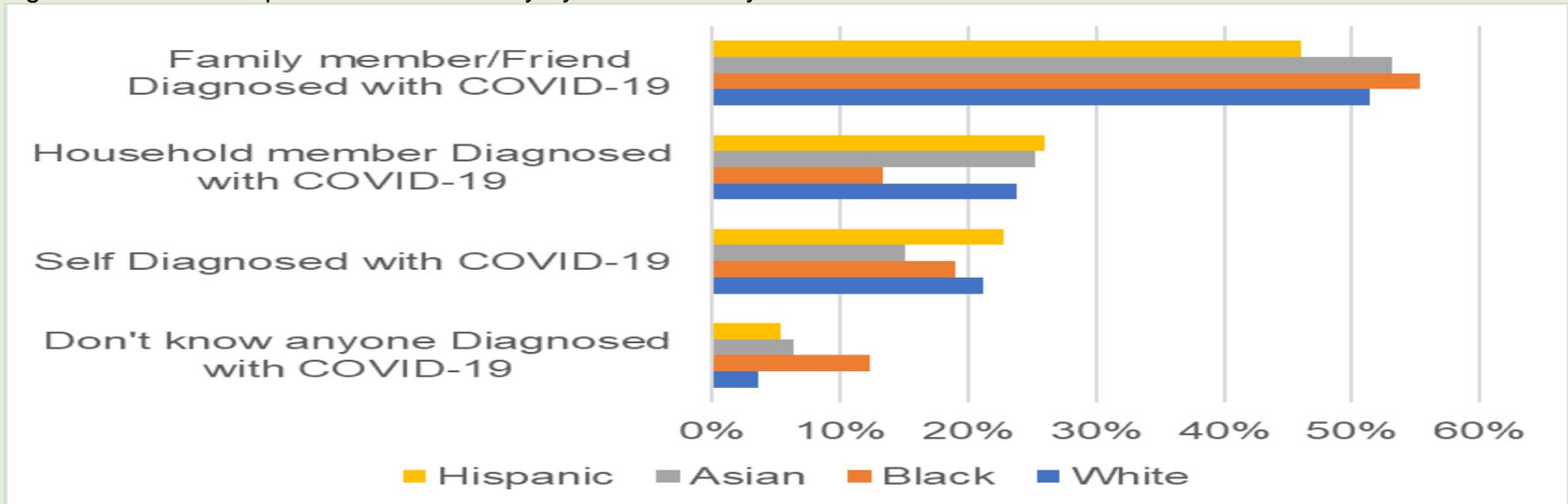


Fig 45. COVID-19 Experience in the Family by Race/ethnicity



The results of COVID-19 experience in the family by PCSA areas are in Table 10. Though results varied by PCSA area, family member or friend outside household diagnosed with COVID-19 was the most experience across all PCSA areas.

Table 10. COVID-19 Experience in the Family by PCSA Areas

	PCSA Areas			
	Germantown/Gaithersburg/ Pooleville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
I have been diagnosed with COVID-19	17.39(5.39-29.39)	20.90 (10.55-31.26)	19.59 (10.35-28.83)	23.81 (14.68-32.95)
Household member diagnosed with COVID-19	21.27(11.26-31.27)	22.25 (9.93-34.58)	25.57 (17.14-34.00)	19.68 (13.31-26.06)
Family member or friend outside household diagnosed with COVID-19	50.34 (33.39-67.28)	52.63 (42.60-62.67)	52.50 (42.09-62.91)	52.95 (37.23-68.68)
Don't know anyone personally with COVID-19	11.01 (2.30-19.73)	4.21 (.00-9.26)	2.34 (.58-4.11)	3.55 (.45-6.64)

Flu Vaccination

15.7% of all residents that completed the survey reported that they have never received the flu vaccine (95% CI: 11.3-20.1) (Fig 46). 17.1% of men and 13.9% of women reported that they have never received the flu vaccine (Fig 47).

Fig 46. Flu Vaccination

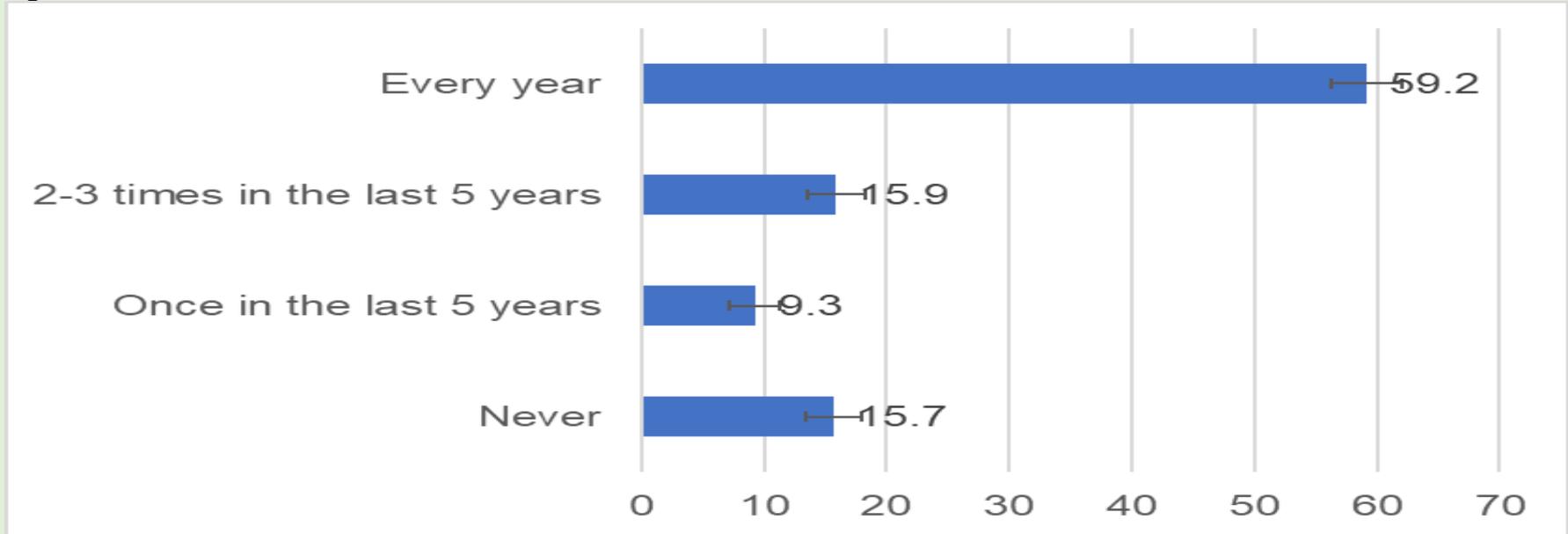
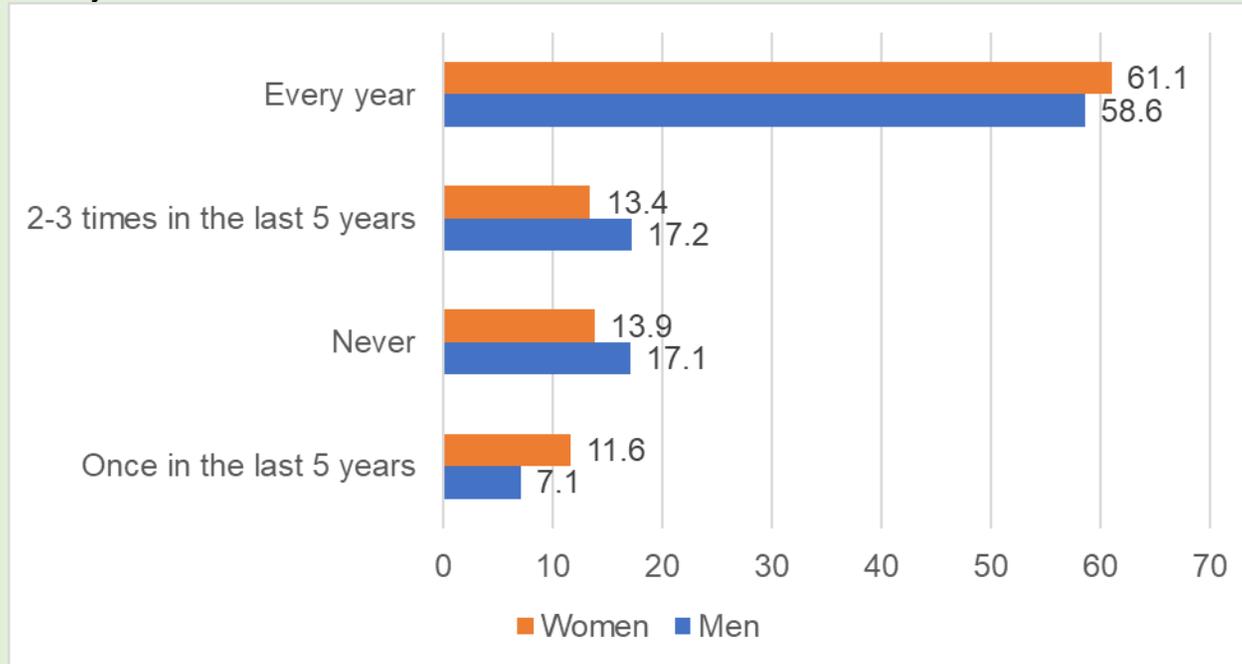


Fig 47. Flu Vaccination by Sex



15.7% of adults aged 18 to 34, 18.6% of adults aged 35 to 64 and 6.6% of those aged 65 years and older reported that they have never received the flu vaccine (Fig 48). 13.6% of White residents reported that they have never received the flu vaccine, compared to 17.2% of African Americans, 19.5% of Hispanics, and 5.4% of Asians (Fig 49).

Fig 48. Flu Vaccination by Age

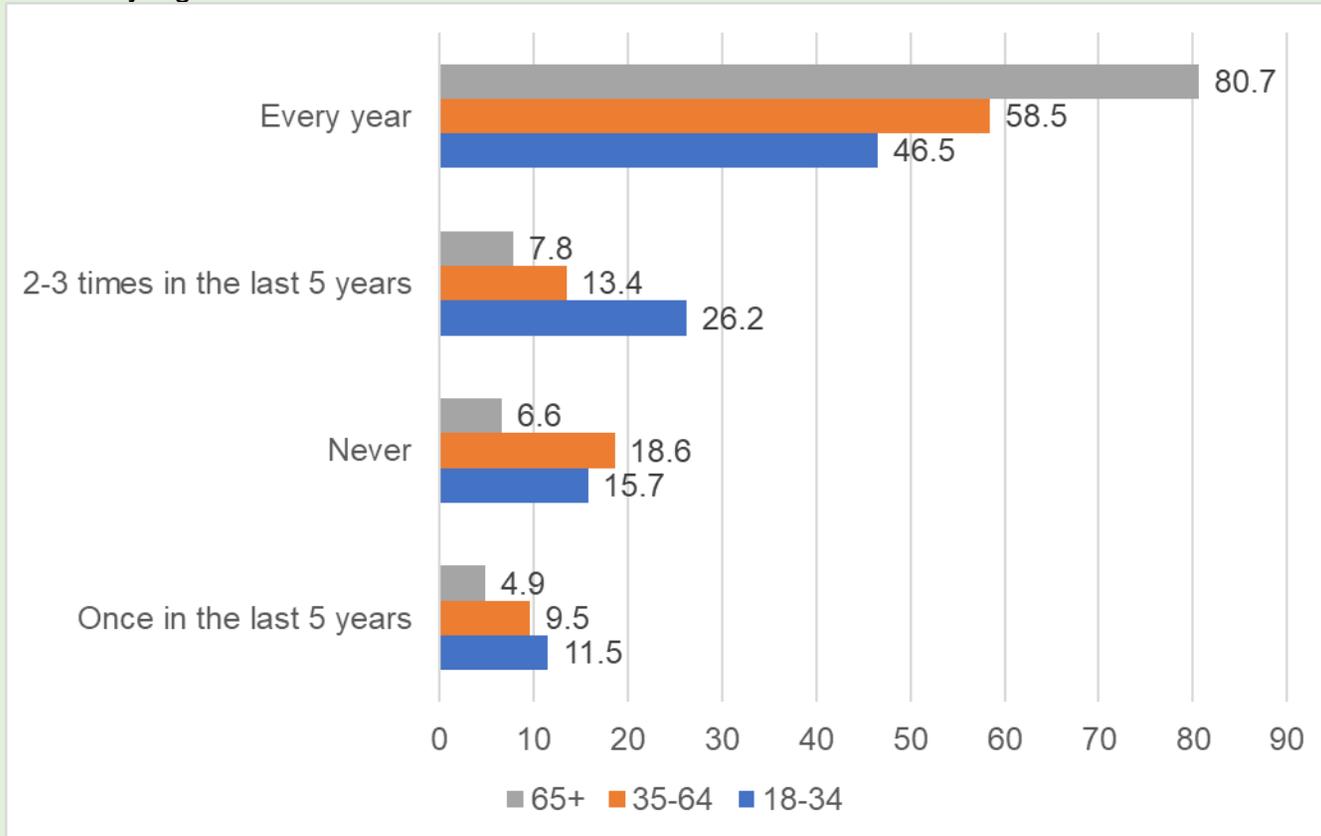
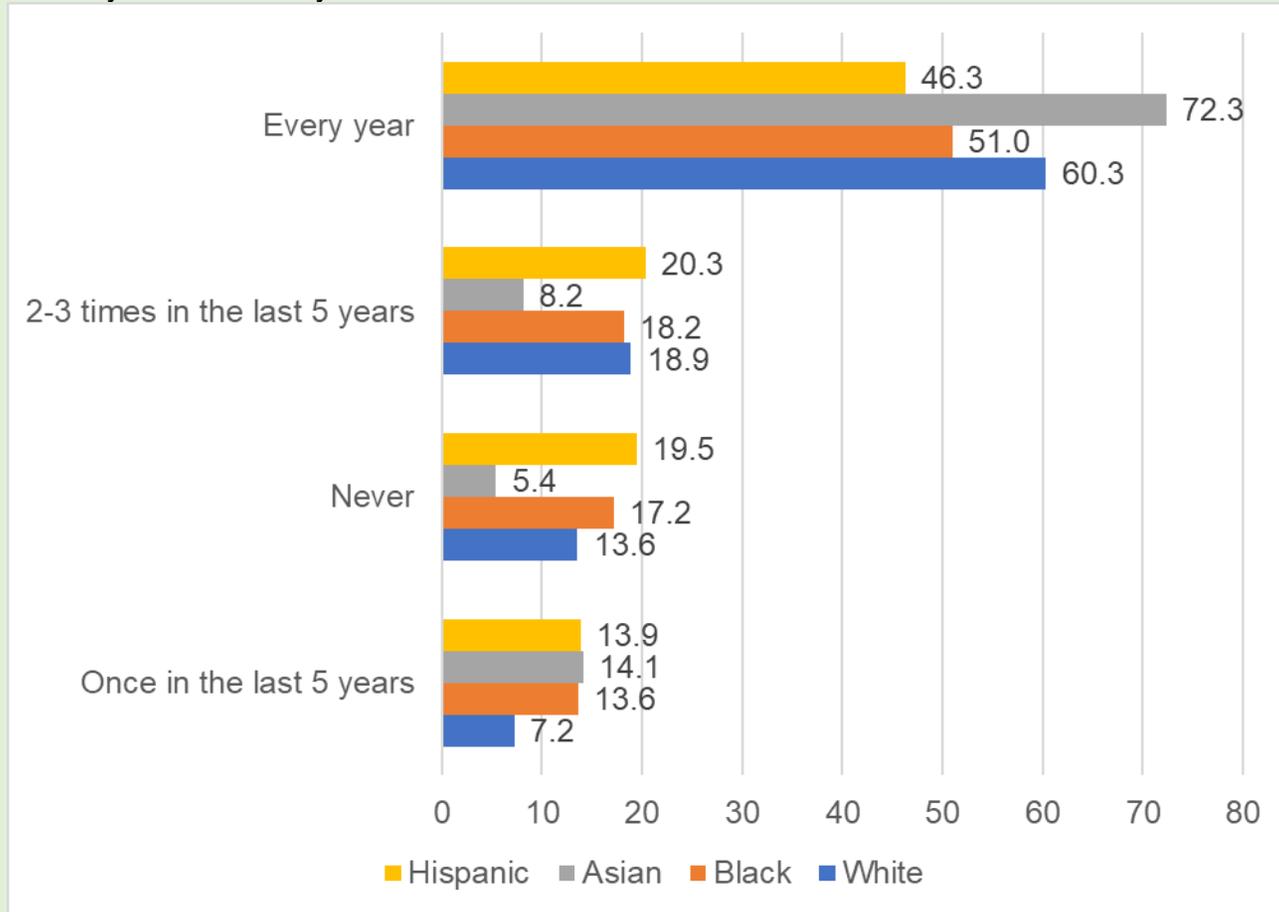


Fig 49. Flu Vaccination by Race/ethnicity



The results of flu vaccination by PCSA areas are in Table 11. Though results varied by PCSA area, Rockville/Washington PCSA area had the highest % residents with flu vaccination every year while Olney/Damascus PCSA area had the highest % residents never having flu vaccination.

Table 11. Flu Vaccination by PCSA Areas

Frequency of Flu Vaccination	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Never	21.3 (12.79-29.79)	23.4 (10.40-36.30)	9.9 (4.71-15.12)	11.4 (3.11-19.73)
Once in the last 5 years	10.5 (1.62-19.40)	9.3 (2.03-16.60)	6.6 (0.20-12.90)	12.8 (1.96-23.73)
2-3 times in the last 5 years	18.6 (7.78-29.40)	13.4 (1.64-25.12)	16.4 (7.62-25.23)	14.1 (3.60-24.69)
Every year	49.6 (39.11-60.11)	54.0 (37.33-70.58)	67.1 (60.08-74.15)	61.6 (55.23-67.94)

Areas Impacted by COVID-19

Results of areas impacted by COVID-19 are in Table 12. Among those areas severely impacted by COVID-19, travel plans/vacations (44.9%), social relationships (27.2%), outdoor recreational activities (19.1%), death of family members or friends (15.1%), and mental health (15.1%) are the top 5 areas.

Table 12. Areas Impacted by COVID-19

COVID 19 Impact		Overall
Finances	No	38.02 (32.32-43.72)
	Mild	28.12 (20.73-35.51)
	Moderate	19.90 (13.51-26.28)
	Severe	13.97 (10.25-17.68)
Food supply	No	47.48 (39.99-54.96)
	Mild	31.34 (24.62-38.07)
	Moderate	16.11 (10.31-21.91)
	Severe	5.07 (2.39-7.75)
Job/wage loss	No	58.64 (53.03-64.26)
	Mild	17.60 (11.77-23.42)
	Moderate	11.36 (6.21-16.50)
	Severe	12.40 (7.69-17.11)
Housing	No	73.33 (67.71-78.95)
	Mild	12.24 (7.29-17.18)
	Moderate	8.87 (4.99-12.75)
	Severe	5.56 (2.31-8.82)
Physical Health	No	36.28 (28.97-43.59)
	Mild	35.76 (30.27-41.25)
	Moderate	21.02 (15.03-27.01)
	Severe	6.94 (3.71-10.18)
Mental Health	No	25.18 (19.24-31.13)
	Mild	28.78 (23.14-34.42)

	Moderate	30.97 (23.91-38.03)
	Severe	15.07 (10.40-19.74)
Childcare	No	77.86 (72.64-83.07)
	Mild	8.11 (3.62-12.61)
	Moderate	7.43 (2.54-12.32)
	Severe	6.6 (3.28-9.92)
Travel plans or vacations	No	10.9 (5.77-16.03)
	Mild	16.85 (11.35-22.35)
	Moderate	27.34 (20.91-33.78)
	Severe	44.9 (36.92-52.89)
Social relationships	No	9.39 (5.34-13.45)
	Mild	25.23 (20.56-29.90)
	Moderate	38.16 (30.67-45.64)
	Severe	27.22 (18.93-35.51)
Death of family members or friends	No	56.47 (51.12-61.83)
	Mild	14.42 (10.67-18.17)
	Moderate	13.98 (9.83-18.12)
	Severe	15.13 (10.23-20.03)
Outdoor recreational activities	No	23.56 (17.93-29.19)
	Mild	32.51 (25.47-39.54)
	Moderate	24.88 (19.69-30.07)
	Severe	19.05 (12.38-25.72)

* Top 5 (severe) are highlighted

Results of areas impacted by COVID-19 by sex are in Table 13. Among those areas severely impacted by COVID-19, travel plans/vacations (49.6%, 40.8%), social relationships (28.5%, 26.4%), outdoor recreational activities (18.8%, 19.5%), death of family members or friends (14.2%, 16.0%), and mental health (13.8%, 16.6%) are also the top 5 areas for men and women respectively.

Table 13. Areas Impacted by COVID-19 by Sex

COVID 19 Impact		Gender	
		Men	Women
Finances	No	37.02 (28.75-45.28)	39.31 (32.32-46.3)
	Mild	33.23 (21.77-44.69)	23.95 (15.88-32.03)
	Moderate	16.71 (7.94-24.57)	21.94 (12.66-31.23)
	Severe	13.04 (7.07-19.01)	14.79 (9.90-19.68)
Food supply	No	49.67 (37.57-61.78)	45.35 (37.56-53.15)
	Mild	32.75 (21.06-44.45)	30.13 (23.16-37.10)
	Moderate	15.27 (4.41-26.13)	16.67 (10.40-22.93)
	Severe	2.30 (0-4.66)	7.85 (3.25-12.45)
Job/wage loss	No	58.59 (48.99-68.19)	59.66 (52.46-66.85)
	Mild	17.42 (6.77-28.07)	16.80 (9.46-24.13)
	Moderate	12.47 (3.92-21.01)	10.41 (5.43-15.39)
	Severe	11.53 (5.45-17.61)	13.14 (5.95-20.32)
Housing	No	70.67 (60.51-80.82)	75.36 (68.16-82.56)
	Mild	13.13 (65.95-20.30)	11.86 (5.48-18.24)
	Moderate	11.75 (4.33-19.11)	6.03 (1.60-10.46)
	Severe	4.48 (0-9.67)	6.76 (2.65-10.87)
Physical Health	No	35.21 (25.32-45.10)	36.11 (26.65-45.56)
	Mild	39.33 (28.46-50.21)	33.56 (25.34-41.78)
	Moderate	19.85 (10.69-29.00)	21.89 (16.53-27.25)
	Severe	5.61 (0.97-10.25)	8.44 (4.67-12.21)
Mental Health	No	25.42 (17.73-33.12)	24.83 (17.23-32.43)
	Mild	31.44 (22.12-40.76)	26.86 (19.38-34.36)
	Moderate	29.37 (19.91-38.83)	31.70 (25.04-38.34)
	Severe	13.77 (5.09-22.45)	16.61 (11.81-21.42)
Childcare	No	75.95 (65.98-85.91)	80.09 (73.65-86.52)

	Mild	9.82 (3.96-15.68)	6.89 (1.45-12.33)
	Moderate	9.21 (0.15-18.28)	5.45 (1.45-9.45)
	Severe	5.02 (0.36-9.69)	7.57 (2.77-12.37)
Travel plans or vacations	No	7.23 (3.49-10.96)	14.73 (5.86-23.60)
	Mild	15.34 (7.19-23.50)	18.15 (9.42-26.88)
	Moderate	27.87 (18.44-37.3)	26.31 (17.96-34.66)
	Severe	49.56 (36.51-62.62)	40.81 (33.54-48.09)
Social relationships	No	9.63 (6.27-12.99)	9.24 (2.68-15.80)
	Mild	24.22 (17.71-30.72)	26.46(20.34-32.60)
	Moderate	37.62 (24.83-50.40)	37.93 (32.25-43.61)
	Severe	28.54 (15.66-41.41)	26.38 (18.70-34.06)
Death of family members or friends	No	57.84 (51.48-64.19)	54.64 (46.80-62.49)
	Mild	13.01 (6.89-19.13)	15.93 (11.49-20.37)
	Moderate	14.96 (6.59-23.32)	13.44 (9.39-17.48)
	Severe	14.19 (7.89-20.50)	16.00 (9.94-22.05)
Outdoor recreational activities	No	20.40 (12.66-28.08)	26.50 (19.07-33.93)
	Mild	32.72 (23.62-41.81)	31.86 (24.53-39.20)
	Moderate	28.09 (18.24-37.93)	22.16 (16.46-27.87)
	Severe	18.83 (9.55-28.11)	19.47 (12.79-26.16)

* Top 5 (severe) are highlighted

Results of areas impacted by COVID-19 by age are in Table 14. Among those areas severely impacted by COVID-19, travel plans/vacations, social relationships, and outdoor recreational activities are top common areas across age groups, mental health (20.9%) for aged 18-34, and death of family members or friends for aged 35-64 (19.4%) and 65+ (17.5%) are also among the top 5 areas.

Table 14. Areas Impacted by COVID-19 by Age

COVID 19 Impact		Age		
		18-34	35-64	65+
Finances	No	43.47 (24.74-62.20)	32.80 (25.58-40.03)	45.32 (37.19-53.44)
	Mild	27.89 (12.17-43.61)	29.72 (22.03-37.42)	23.82 (17.28-30.37)
	Moderate	22.64 (4.67-40.60)	19.15 (14.07-24.23)	16.88 (9.73-24.03)
	Severe	6.0 (0-13.62)	18.32 (12.40-24.25)	13.98 (6.62-21.34)
Food supply	No	58.64 (39.41-77.87)	42.89 (34.29-51.5)	43.45 (32.56-54.35)
	Mild	27.44 (11.37-43.51)	32.90 (26.15-39.66)	33.12 (22.89-43.36)
	Moderate	11.97 (0-25.52)	17.97 (10.00-25.94)	17.11 (9.14-25.07)
	Severe	1.94 (0-5.58)	6.24 (1.48-10.99)	6.32 (0.13-12.50)
Job/wage loss	No	61.73 (46.71-76.75)	53.36 (46.31-60.42)	69.64 (59.91-79.36)
	Mild	21.84 (7.91-35.78)	18.35 (12.06-24.65)	9.21 (2.46-15.86)
	Moderate	8.22 (0-21.83)	11.76 (6.54-16.97)	13.88 (5.88-21.87)
	Severe	8.20 (0-17.98)	16.53 (10.08-22.97)	7.27 (3.87-10.67)
Housing	No	64.53 (45.76-83.31)	73.67 (67.41-79.93)	87.79 (80.45-95.13)
	Mild	14.30 (3.32-25.27)	12.73 (6.69-18.77)	6.86 (0.58-13.13)
	Moderate	14.07 (0-27.71)	7.69 (3.24-12.14)	3.22 (0.08-6.36)
	Severe	7.10 (0-15.41)	5.91 (1.99-9.83)	2.13 (0.07-4.20)
Physical Health	No	39.94 (17.15-62.73)	31.48 (24.05-38.91)	45.17 (36.13-54.21)
	Mild	36.30 (21.81-50.79)	37.18 (30.43-43.92)	30.4 (21.37-39.43)
	Moderate	22.84 (6.71-38.98)	21.69 (14.91-28.47)	16.13 (8.23-24.04)
	Severe	0.92 (0-34.49)	9.65 (3.22-16.07)	8.30 (1.87-14.72)
Mental Health	No	16.17 (2.52-29.82)	22.75 (16.72-28.78)	45.53 (37.36-53.71)
	Mild	24.22 (8.82-39.63)	29.84 (24.08-35.60)	31.19 (22.71-39.67)
	Moderate	38.62 (18.72-58.51)	32.63 (24.87-40.40)	15.51 (9.21-21.82)
	Severe	20.99 (8.30-33.69)	14.77 (9.16-20.38)	7.77 (3.50-12.04)

Childcare	No	78.06 (64.09-92.02)	72.69 (67.85-77.52)	94.20 (90.20-98.21)
	Mild	9.40 (0-21.45)	9.00 (5.42-12.58)	2.27 (0-5.30)
	Moderate	7.70 (0-21.13)	9.20 (4.87-13.54)	1.65 (0-3.44)
	Severe	4.86 (0-11.99)	9.11 (5.35-12.87)	1.87 (0-3.84)
Travel plans or vacations	No	7.60 (0-16.95)	8.85 (2.53-15.20)	22.31 (14.84-29.77)
	Mild	20.61 (6.5-34.71)	15.89 (10.21-21.37)	15.27 (9.86-20.68)
	Moderate	22.74 (7.26-38.22)	29.83 (21.46-38.20)	25.20 (15.49-34.90)
	Severe	49.06 (27.44-70.68)	45.53 (38.58-52.47)	37.23 (27.51-46.95)
Social relationships	No	11.82 (2.70-20.94)	6.49 (1.87-11.11)	13.71 (7.20-20.22)
	Mild	22.40 (9.82-34.97)	23.88 (18.30-29.45)	33.45 (24.36-42.55)
	Moderate	38.15 (18.91-57.40)	39.65 (33.47-45.83)	33.48 (25.23-41.73)
	Severe	27.63 (8.97-46.30)	29.99 (20.0-39.97)	19.36 (11.26-27.46)
Death of family members or friends	No	71.04 (54.96-87.13)	49.13 (42.96-55.30)	56.15 (45.42-66.88)
	Mild	9.78 (0.50-19.05)	16.65 (12.38-20.91)	14.82 (8.57-21.07)
	Moderate	13.83 (0-27.99)	14.83 (10.30-19.36)	11.48 (4.84-18.12)
	Severe	5.34 (0-12.0)	19.39 (11.49-27.29)	17.54 (8.47-26.61)
Outdoor recreational activities	No	30.26 (17.05-43.46)	19.23 (13.93-24.52)	26.91 (20.83-32.98)
	Mild	31.67 (10.15-53.20)	32.34 (25.62-39.06)	31.69 (24.14-39.24)
	Moderate	24.29 (7.82-40.76)	25.12 (18.51-30.73)	26.10 (18.32-33.89)
	Severe	13.78 (0-29.0)	23.31 (16.54-30.08)	15.30 (6.92-23.67)

* Top 5 (severe) are highlighted

Results of areas impacted by COVID-19 by race/ethnicity are in Table 15. Among those areas severely impacted by COVID-19, travel plans/vacations, social relationships, and outdoor recreational activities are top common areas across race/ethnicity groups, mental health for Whites (14.9%) and Asians (16.5%), finances for African Americans (30.8%), and death of family members or friends for Hispanics (30.1%) are also among the top 5 areas.

Table 15. Areas Impacted by COVID-19 by Race/ethnicity

COVID 19 Impact		Race/Ethnicity			
		White	African American	Asian	Hispanic
Finances	No	45.13 (34.98-55.28)	33.10 (20.62-45.57)	33.01 (19.10-46.92)	28.26 (10.46-46.06)
	Mild	30.53 (19.95-41.11)	13.71 (4.48-22.94)	41.17 (22.24-60.09)	21.64 (1.41-41.87)
	Moderate	16.18 (9.16-23.19)	22.36 (12.03-32.69)	11.69 (0-23.37)	28.70 (1.87-55.52)
	Severe	8.16 (3.95-12.37)	30.83 (15.54-46.12)	14.14 (2.58-25.71)	21.41 (9.19-33.63)
Food supply	No	51.07 (39.54-62.59)	40.76 (24.69-56.83)	50.80 (33.61-67.97)	39.19 (19.83-58.55)
	Mild	34.97 (26.31-43.63)	23.78 (10.43-37.14)	33.47 (20.21-46.72)	22.34 (1.91-42.78)
	Moderate	11.88 (5.67-18.10)	17.60 (6.66-28.64)	12.81 (4.27-21.36)	29.98 (3.93-56.04)
	Severe	2.08 (0.78-3.38)	17.86 (5.06-30.65)	2.93 (0-6.66)	8.48 (2.72-14.25)
Job/wage loss	No	67.65 (57.94-77.35)	47.71 (34.43-60.99)	57.16 (36.97-77.35)	35.09 (14.07-56.11)
	Mild	18.43 (8.65-28.21)	5.62 (1.42-9.81)	22.92 (6.65-39.18)	28.74 (4.86-52.62)
	Moderate	6.44 (2.87-10.01)	23.51 (7.40-39.64)	9.79 (1.50-18.09)	16.37 (0-38.80)
	Severe	7.48 (2.11-12.86)	23.15 (9.58-36.73)	10.13 (1.51-18.76)	19.79 (6.15-33.44)
Housing	No	79.25 (68.92-89.58)	58.90 (42.55-75.26)	73.64 (59.91-87.38)	56.09 (33.22-78.96)
	Mild	13.00 (4.35-21.66)	9.15 (0-19.63)	8.43 (0-18.25)	11.95 (0-24.09)
	Moderate	6.75 (0.63-12.86)	11.88 (0.18-23.57)	7.98 (1.70-14.27)	28.48 (5.93-51.03)
	Severe	1.00 (0-2.83)	20.07 (6.67-33.47)	9.95 (0-25.08)	3.49 (0-9.00)
Physical Health	No	38.24 (28.72-47.77)	45.37 (28.91-61.83)	31.10 (13.90-48.30)	25.91 (6.81-45.00)
	Mild	38.76 (32.84-44.67)	27.04 (12.00-42.07)	35.56 (21.03-50.09)	37.60 (10.43-64.78)
	Moderate	19.35 (12.66-26.04)	18.77 (1.073-35.81)	22.24 (2.15-42.33)	26.02 (11.55-40.49)
	Severe	3.65 (0.75-6.55)	8.82 (0-18.18)	11.11 (0.68-21.54)	10.47 (0-21.34)
Mental Health	No	21.13 (14.77-27.50)	41.80 (22.16-61.43)	33.64 (15.95-51.32)	22.66 (2.73-42.60)
	Mild	31.30 (22.96-39.63)	20.88 (10.60-31.17)	27.17 (15.00-39.35)	35.48 (11.77-59.20)
	Moderate	32.66 (24.53-40.78)	20.90 (5.74-36.07)	22.69 (10.36-35.02)	32.57 (11.92-53.22)
	Severe	14.91 (8.37-21.45)	16.42 (4.46-28.38)	16.50 (4.48-28.52)	9.29 (0-18.79)

Childcare	No	82.21 (76.55-87.88)	80.45 (66.34-94.55)	68.83 (48.00-89.66)	64.93 (46.56-83.30)
	Mild	5.22 (2.88-7.57)	6.73 (0-16.22)	16.99 (0-39.89)	11.03 (0-25.72)
	Moderate	6.68 (3.01-10.36)	6.54 (0-15.71)	8.02 (0-17.81)	15.15 (0-38.57)
	Severe	5.88 (1.77-9.99)	6.28 (1.60-10.96)	6.16 (0-13.36)	8.88 (0-18.34)
Travel plans or vacations	No	9.26 (3.81-14.71)	24.65 (9.32-39.98)	3.42 (0.05-6.78)	7.74 (0-17.55)
	Mild	16.33 (9.91-22.74)	13.94 (1.97-25.92)	26.9 (6.67-47.15)	16.57 (2.50-30.64)
	Moderate	31.05 (23.18-38.92)	20.42 (9.97-30.87)	17.53 (6.55-28.51)	30.71 (0.20-61.21)
	Severe	43.36 (34.12-52.60)	40.99 (25.65-56.32)	52.14 (34.31-69.97)	44.99 (15.76-74.21)
Social relationships	No	7.04 (2.34-11.74)	16.86 (0.36-33.37)	13.26 (0-27.26)	14.33 (4.28-24.37)
	Mild	26.55 (19.96-33.15)	20.77 (8.53-33.03)	37.12 (18.20-56.03)	18.22 (9.23-27.20)
	Moderate	41.02 (33.90-48.13)	29.74 (15.58-43.91)	30.16 (18.57-41.74)	27.28 (3.35-51.22)
	Severe	25.39 (16.50-34.29)	32.61 (13.92-51.31)	19.47 (8.49-30.44)	40.18 (13.50-66.85)
Death of family members or friends	No	60.26 (51.76-68.75)	53.52 (37.26-69.78)	64.20 (47.24-81.17)	35.23 (16.35-54.11)
	Mild	14.72 (9.34-20.19)	14.23 (4.54-23.92)	15.23 (7.15-23.30)	8.84 (0.88-16.80)
	Moderate	10.86 (4.39-17.32)	20.92 (11.65-30.19)	7.64 (2.84-12.45)	30.12 (6.78-53.46)
	Severe	14.18 (8.09-20.26)	11.33 (4.00-18.66)	12.93 (2.80-23.06)	25.81 (10.45-41.17)
Outdoor recreational activities	No	29.87 (20.99-38.75)	19.42 (10.68-28.16)	12.07 (4.43-19.71)	11.68 (1.72-21.65)
	Mild	33.39 (22.97-43.81)	24.29 (10.74-37.84)	45.00 (30.07-59.92)	27.02 (12.41-41.63)
	Moderate	25.15 (15.39-34.92)	23.15 (8.72-37.59)	20.60 (9.05-32.15)	37.84 (13.53-62.14)
	Severe	11.59 (4.43-18.75)	33.14 (20.49-45.78)	22.33 (7.21-37.44)	23.46 (1.31-45.62)

* Top 5 (severe) are highlighted

The results of areas impacted by COVID-19 by PCSA areas are in Table 16. Among those areas severely impacted by COVID-19, travel plans/vacations, social relationships, and outdoor recreational activities are top common areas across PCSA areas, job or wage loss for Germantown/Gaithersburg/Poolsville PCSA area (13.9%), death of family member or friends for Olney/Damascus PCSA area (25.7%), mental health for Rockville/Washington PCSA area (18.3%), and finances (for Silver Spring/Takoma Park PCSA area (20.9%) are also among the top 5 areas.

Table 16. Areas Impacted by COVID-19 by PCSA Areas

Areas Impacted by COVID-19		PCSA Areas			
		Germantown/Gaithersburg/ Poolsville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Finances	No	31.6 (15.83- 47.44)	34.6 (22.29- 46.90)	44.0 (33.06- 54.93)	37.7 (27.12- 48.24)
	Mild	29.3 (1.76- 56.90)	27.7 (12.75- 42.65)	30.1 (17.92- 42.21)	25.1 (17.74- 32.53)
	Moderate	26.7 (14.27- 39.21)	22.9 (10.16- 35.65)	15.6 (2.17- 28.97)	16.2 (9.86- 22.61)
	Severe	12.3 (3.33- 21.25)	14.8 (7.12- 22.48)	10.4 (6.21- 14.53)	20.9 (10.10- 31.79)
Food supply	No	35.4 (20.01- 50.82)	38.9 (24.16- 53.58)	60.5 (49.92- 71.03)	46.1 (26.24- 65.98)
	Mild	36.0 (15.67- 56.34)	32.2 (22.45- 41.97)	27.2 (18.00- 36.30)	33.1 (18.42- 47.75)
	Moderate	19.8 (8.76- 30.88)	27.4 (9.52- 45.27)	8.1 (4.31- 11.93)	13.9 (6.18- 21.56)
	Severe	8.8 (5.26- 12.27)	1.5 (0.00- 4.55)	4.3 (1.15- 7.36)	6.9 (0.00- 15.99)
Job or wage loss	No	49.0 (38.07- 60.01)	52.7 (39.48- 65.99)	69.3 (61.04- 77.57)	56.6 (45.40- 67.73)
	Mild	26.1 (9.38- 42.75)	20.2 (7.51- 32.97)	14.2 (7.59- 20.85)	13.1 (3.81- 22.30)
	Moderate	11.0 (1.42- 20.49)	15.6 (0.00- 32.60)	7.9 (2.46- 13.41)	11.6 (1.85- 21.34)
	Severe	13.9 (4.07- 23.82)	11.5 (3.19- 19.71)	8.5 (2.18- 14.89)	18.8 (4.18- 33.38)
Housing	No	64.1 (51.96- 76.30)	66.8 (47.91- 85.79)	82.0 (72.25- 91.76)	74.4 (64.94- 83.95)
	Mild	13.7 (0.00- 29.75)	16.2 (7.52- 24.84)	8.5 (2.86- 14.10)	12.3 (1.78- 22.77)
	Moderate	15.5 (5.49- 25.52)	12.1 (0.00- 24.69)	4.6 (0.10- 9.18)	6.8 (0.00- 14.33)
	Severe	6.7 (2.59- 10.80)	4.9 (0.00- 11.36)	4.9 (0.00- 11.91)	6.5 (0.00- 15.66)
Physical health	No	34.2 (15.39- 53.11)	36.4 (31.12- 41.76)	39.2 (20.82- 57.65)	32.3 (21.00- 43.59)
	Mild	34.3 (17.67- 50.85)	34.1 (23.44- 44.72)	38.9 (29.41- 48.34)	33.5 (23.20- 43.70)
	Moderate	20.6 (7.20- 33.90)	21.1 (10.57- 31.68)	16.6 (4.10- 29.14)	29.3 (18.15- 40.43)
	Severe	10.9 (3.34- 18.54)	8.4 (0.00- 20.06)	5.3 (2.66- 7.88)	5.0 (0.23- 9.69)

Mental health	No	33.3 (18.06- 48.58)	29.5 (16.77- 42.28)	18.9 (8.30- 29.44)	23.9 (17.22- 30.50)
	Mild	27.4 (10.40- 44.49)	26.1 (15.84- 36.27)	30.7 (21.76- 39.55)	29.1 (16.17- 41.93)
	Moderate	27.4 (17.13- 37.64)	32.6 (18.88- 46.34)	32.1 (17.95- 46.35)	30.7 (17.38- 44.10)
	Severe	11.9 (4.26- 19.44)	11.8 (1.08- 22.54)	18.3 (9.70- 26.95)	16.3 (10.01- 22.67)
Childcare	No	79.9 (69.47- 90.26)	76.8 (69.96- 83.73)	73.9 (60.19- 87.60)	83.9 (74.39- 93.34)
	Mild	7.1 (0.43- 13.80)	8.8 (0.00- 22.72)	11.3 (2.29- 20.32)	3.2 (0.09- 6.21)
	Moderate	7.0 (0.00- 14.91)	9.9 (0.00- 26.37)	8.2 (1.55- 14.80)	3.5 (1.46- 5.53)
	Severe	6.1 (2.59- 9.54)	4.5 (0.39- 8.57)	6.6 (0.44- 12.80)	9.5 (0.00- 19.87)
Travel plans or vacations	No	23.6 (1.58- 45.62)	10.3 (1.00- 19.68)	5.1 (1.66- 8.45)	9.7 (0.99- 18.34)
	Mild	20.8 (10.58- 31.05)	14.6 (7.85- 21.31)	18.0 (4.12- 31.85)	14.7 (9.11- 20.21)
	Moderate	14.6 (4.56- 24.69)	32.8 (22.73- 42.97)	29.7 (19.67- 39.82)	27.7 (14.03- 41.34)
	Severe	41.0 (24.17- 57.75)	42.2 (27.25- 57.21)	47.2 (31.32- 63.11)	48.0 (35.08- 60.90)
Social relationships	No	10.4 (0.00- 22.34)	5.1 (0.02- 10.08)	11.6 (6.18- 17.03)	8.9 (0.00- 19.84)
	Mild	32.5 (25.10- 39.91)	23.9 (12.51- 35.36)	22.9 (17.60- 28.28)	23.6 (9.64- 37.48)
	Moderate	29.4 (18.03- 40.72)	42.7 (19.34- 65.96)	41.4 (32.05- 50.68)	36.3 (24.61- 48.02)
	Severe	27.8 (13.29- 42.22)	28.4 (4.64- 52.09)	24.1 (12.95- 35.24)	31.2 (13.54- 48.92)
Death of family member or friends	No	51.7 (35.07- 68.32)	47.4 (38.83- 56.06)	65.3 (54.45- 76.13)	55.6 (46.18- 64.99)
	Mild	14.2 (1.30- 27.17)	14.7 (5.86- 23.60)	13.8 (8.06- 19.50)	15.1 (8.18- 21.94)
	Moderate	21.3 (8.61- 33.90)	12.1 (2.23- 22.00)	10.8 (4.25- 17.26)	13.7 (8.00- 19.43)
	Severe	12.8 (2.59- 23.06)	25.7 (10.02- 41.39)	10.2 (2.67- 17.69)	15.6 (7.49- 23.79)
Outdoor recreational activities	No	24.9 (9.78- 40.03)	16.5 (8.72- 24.35)	27.2 (15.26- 39.10)	24.4 (13.24- 35.53)
	Mild	29.5 (12.42- 46.55)	25.0 (13.39- 36.69)	38.7 (24.59- 52.84)	31.9 (24.86- 38.99)
	Moderate	28.3 (15.69- 40.86)	33.8 (21.59- 46.06)	19.1 (9.16- 29.00)	22.0 (14.54- 29.49)
	Severe	17.3 (7.22- 27.46)	24.6 (7.26- 41.95)	15.0 (4.86- 25.19)	21.7 (13.22- 30.12)

* Top 5 (severe) are highlighted

Areas Need Assistance with due to COVID-19

Results of areas needing assistance with due to COVID-19 are in Table 17. Among areas needing assistance, financial assistance (12.8%), food assistance (9.3%), and health care (8.4%) are the top 3 areas.

Table 17. Areas Need Assistance with due to COVID-19

Areas Need Assistance	Overall
Health care	8.42 (5.06-11.77)
Financial assistance	12.75 (8.38-17.12)
Energy assistance (utilities)	6.01 (3.08-8.94)
Food assistance	9.32 (5.44-13.20)
Wi-Fi/internet	4.96 (1.83-8.09)
Housing/shelter	2.66 (0.82-4.49)
Translation/interpretation services	1.44 (0-3.09)
Childcare	3.73 (1.84-5.62)
Rental/mortgage assistance	8.30 (5.44-11.15)
None of the above	42.42 (38.19-46.65)

* Top 3 are highlighted (other than none of the above)

Results of areas needing assistance with due to COVID-19 by sex are in Table 18. Among areas needing assistance, financial assistance is the most area for both men (15.4%) and women (10.3%). Rental/mortgage (9.8%) and food assistance (9.9%) are also among the top areas needing assistance for men and women respectively.

Table 18. Areas Need Assistance with due to COVID-19 by Sex

Areas Need Assistance	Sex	
	Men	Women
Health care	9.61 (4.32-14.90)	7.60 (3.32-11.89)
Financial assistance	15.36 (9.96-20.77)	10.28 (4.66-15.91)
Energy assistance (utilities)	4.00 (0-8.98)	7.86 (4.42-11.30)
Food assistance	8.57 (1.83-15.32)	9.99 (5.75-14.23)
Wi-Fi/internet	6.38 (0-13.00)	3.76 (2.29-5.23)
Housing/shelter	1.62 (0-3.43)	3.70 (0.57-6.82)
Translation/interpretation services	1.24 (0-2.76)	1.70 (0-4.09)
Childcare	4.63 (0.90-8.37)	3.02 (1.43-4.61)
Rental/mortgage assistance	9.75 (5.14-14.37)	6.77 (2.78-10.76)
None of the above	38.85 (32.89-44.80)	45.31 (39.33-51.30)

* Top 3 are highlighted (other than none of the above)

Results of areas needing assistance with due to COVID-19 by age are in Table 19. Among areas needing assistance, financial assistance is the most area across age groups. Food assistance for aged 35-64 (10.2%) and for aged 65+ (7.2%), and health care for aged 18-34 (9.5%) are also among the top areas needing assistance.

Table 19. Areas Need Assistance with due to COVID-19 by Age

Areas Need Assistance	Age		
	18-34	35-64	65+
Health care	9.50 (0-19.78)	8.26 (5.39-11.13)	7.08 (2.84-11.32)
Financial assistance	15.43 (3.26-27.61)	12.41 (6.46-18.37)	9.59 (4.16-15.03)
Energy assistance (utilities)	4.64 (0-13.77)	6.30 (2.93-9.67)	6.60 (2.35-10.84)
Food assistance	8.96 (0-18.53)	10.23 (6.14-14.32)	7.24 (2.32-12.17)
Wi-Fi/internet	6.02 (0-14.61)	4.97 (2.49-7.45)	3.02 (1.18-4.87)
Housing/shelter	2.57 (0-5.88)	3.02 (0.32-5.73)	1.57 (0-3.43)
Translation/interpretation services	1.12 (0-3.40)	1.86 (0-4.29)	0.64 (0-1.85)
Childcare	3.91 (0-9.86)	4.63 (2.33-6.94)	0.43 (0-1.56)
Rental/mortgage assistance	9.03 (0-18.73)	9.12 (4.62-13.62)	4.25 (0.97-7.52)
None of the above	38.81 (26.16-51.47)	39.19 (33.60-44.78)	59.57 (52.4-66.75)

* Top 3 are highlighted (other than none of the above)

Results of areas needing assistance with due to COVID-19 by race/ethnicity are in Table 20. Among areas needing assistance, financial assistance is the most area across age groups. Health care for Whites (8.5%) and for Asian (12.9%), and food assistance for African American (17.6%) and for Hispanics (12.6%) are also among the top areas needing assistance.

Table 20. Areas Need Assistance with due to COVID-19 by Race/ethnicity

Areas Need Assistance	Race/ethnicity			
	White	African American	Asian	Hispanic
Health care	8.45 (2.01-14.90)	6.89 (1.63-12.15)	12.89 (0.32-25.47)	10.93 (2.07-19.78)
Financial assistance	10.29 (3.30-17.28)	16.09 (7.95-24.24)	15.15 (5.81-24.49)	19.77 (9.06-30.49)
Energy assistance (utilities)	3.77 (0.37-7.18)	9.01 (3.60-14.42)	3.76 (0-8.16)	9.12 (0.58-17.66)
Food assistance	4.88 (0.87-8.88)	17.58 (10.14-25.02)	6.80 (0-14.44)	12.62 (3.44-21.79)
Wi-Fi/internet	2.64 (0-5.89)	6.89 (0.88-12.90)	2.91 (0-6.81)	7.76 (0-18.48)
Housing/shelter	1.65 (0-3.90)	5.34 (0-10.92)	3.23 (0-7.52)	1.29 (0-3.10)
Translation/interpretation services	0.94 (0-3.31)	1.10 (0-3.39)	2.04 (0-4.92)	2.85 (0-7.34)
Childcare	3.04 (0.60-5.48)	3.87 (0.01-7.72)	6.96 (0-16.23)	0.95 (0-2.10)
Rental/mortgage assistance	4.56 (0.61-8.51)	13.42 (7.85-18.98)	5.88 (0.57-11.19)	12.52 (0-25.19)
None of the above	59.78 (52.12-67.43)	19.82 (14.78-24.85)	40.38 (27.63-53.14)	22.19 (11.35-33.03)

* Top 3 are highlighted (other than none of the above)

The results of areas need assistance with due to COVID-19 by PCSA areas are in Table 20. Among areas needing assistance, financial assistance, health care, and food assistance are the most areas across all PCSA areas.

Table 21. Areas Need Assistance with due to COVID-19 by PCSA Areas

Areas need assistance	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Translation/interpretation services	2.42 (.00-6.26)	.61 (.00-2.36)	1.95 (.00-5.89)	.91 (0-3.52)
Wi-Fi/internet	2.46 (.00-5.35)	1.20 (.00-2.84)	2.21 (.22-4.20)	3.83 (0-8.84)
Housing/shelter	3.11 (.00-7.31)	1.35 (.00-3.03)	2.59 (.00-5.82)	4.15 (1.09-7.20)
Childcare	3.15 (.00-8.05)	5.39 (1.54-9.24)	3.62 (.00-7.31)	5.66 (2.02-9.30)
Energy assistance (utilities)	6.60 (.87-12.33)	7.62 (.00-16.01)	5.07 (1.73-8.42)	6.47 (1.68-11.26)
Rental/mortgage assistance	7.94 (2.16-13.73)	8.67 (.47-16.87)	5.27 (2.31-8.23)	9.63 (3.70-15.56)
Food assistance	11.32 (2.50-20.14)	9.64 (.00-22.39)	5.68 (1.75-9.60)	9.91 (3.35-16.48)
Healthcare	11.80 (.00-24.83)	12.58 (.49-24.68)	7.57 (3.21-11.93)	12.15 (6.03-18.27)
Financial Assistance	15.87 (3.16-28.59)	13.48 (7.57-19.38)	9.56 (4.57-14.54)	13.03 (1.56-24.49)
None of the above	35.33 (23.43-47.23)	39.45 (29.16-49.75)	56.48 (41.19-71.77)	34.26 (19.67-48.85))

* Top 3 are highlighted (other than none of the above)

Experience in COVID-19 Testing

Overall, 0.6% of those that completed the survey indicated that they are not interested in being tested for COVID-19 under any circumstances. Overall, 3.4% of all residents that completed the survey indicated that they have not been tested for COVID-19 at the time the survey was administered (Fig 50). 3.7% of men and 3.3% of women reported not have been tested for COVID-19. 0.4% of men and 0.8% of women reported that they are not interested in being tested for COVID-19 under any circumstances (Fig 51).

Fig 50. Experience in COVID-19 Testing

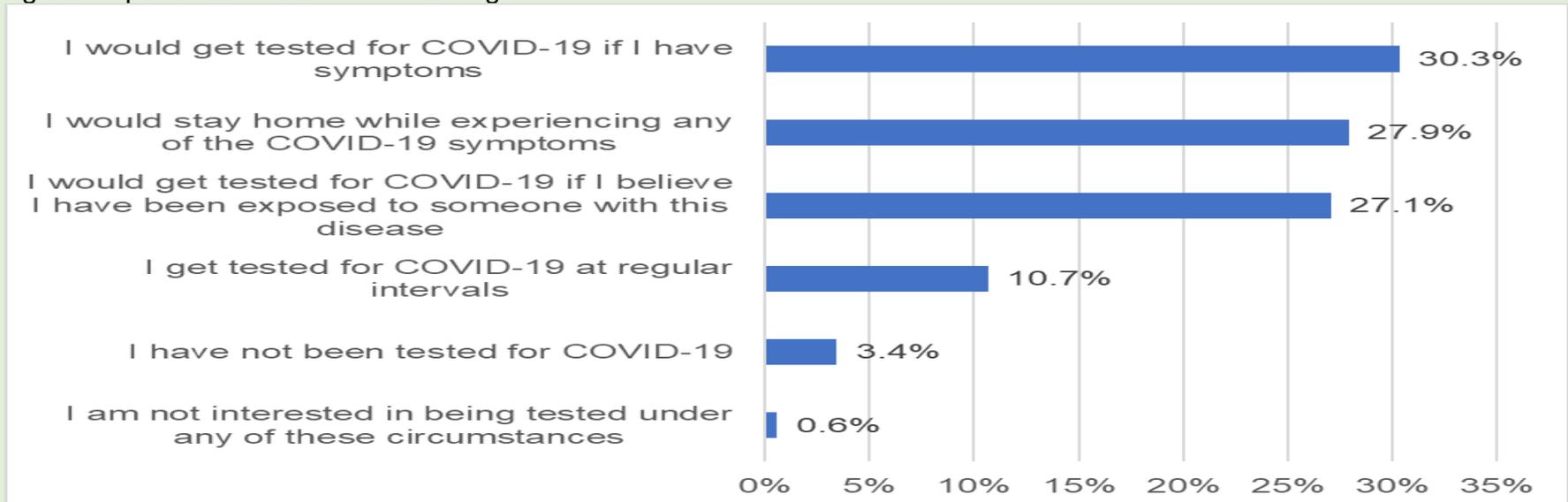
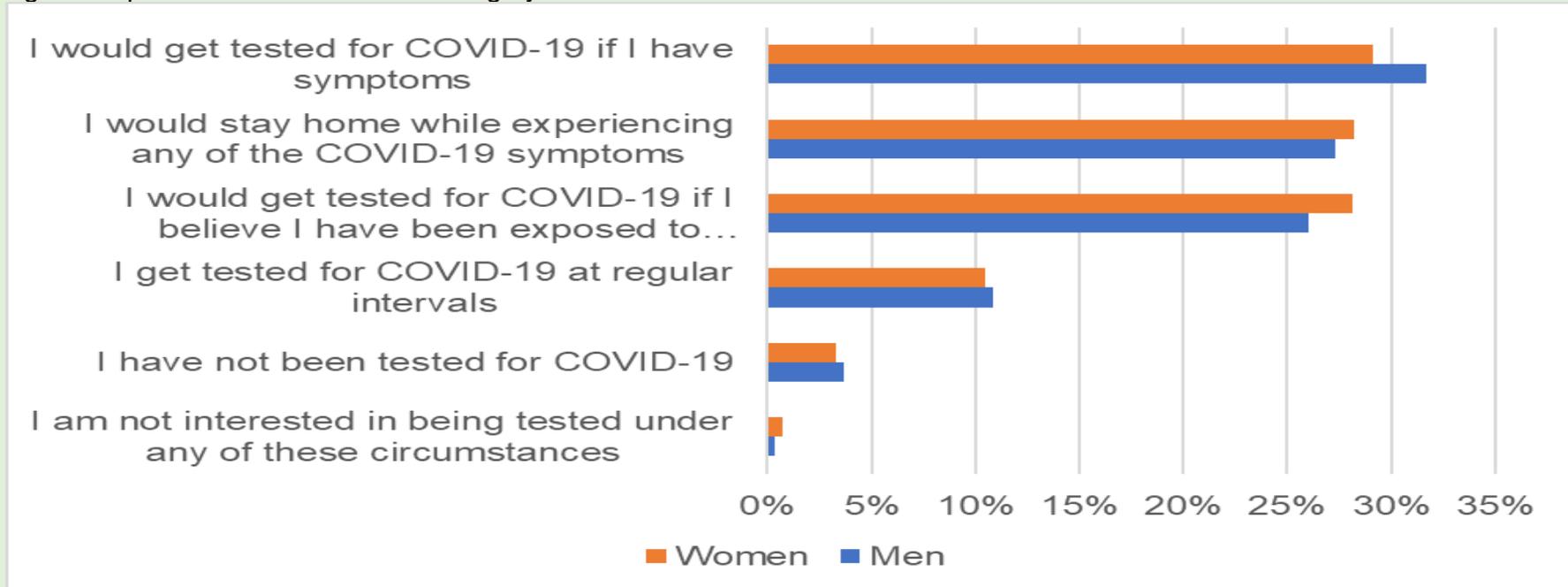


Fig 51. Experience in COVID-19 Testing by Sex



3.5% of those between age 18 and 34, 2.5% of those between age 35 and 64 and 5.7% of those aged 65 and older reported not been tested for COVID-19. 0.2% of adults aged 18 to 34, 0.7% of adults aged 35 and 64, and 0.7% of those aged 65 years and older reported that they are not interested in being tested for COVID-19 under any circumstances (Fig 52). 2.6% of whites, 4.0% of African Americans, 7.7% of Hispanics, and 3.5% of Asians have not been tested for COVID-19. 0.5% of white residents reported that they are not interested in being tested for COVID-19 under any circumstances compared to 1.3% of African Americans (Fig 53).

Fig 52. Experience in COVID-19 Testing by Age

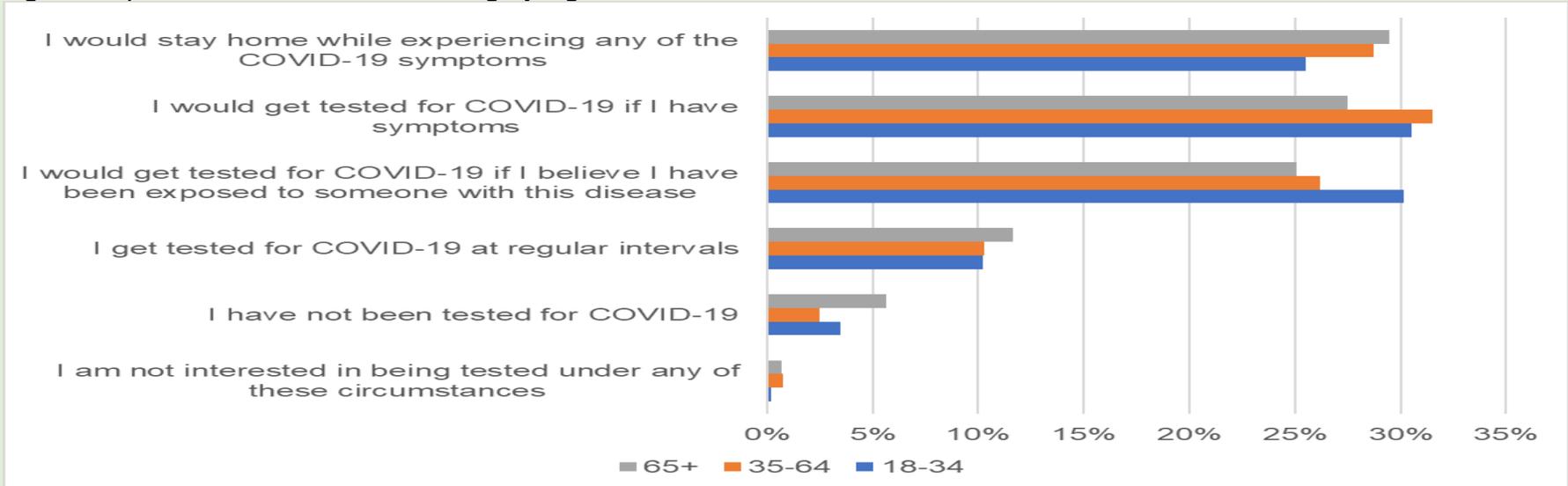
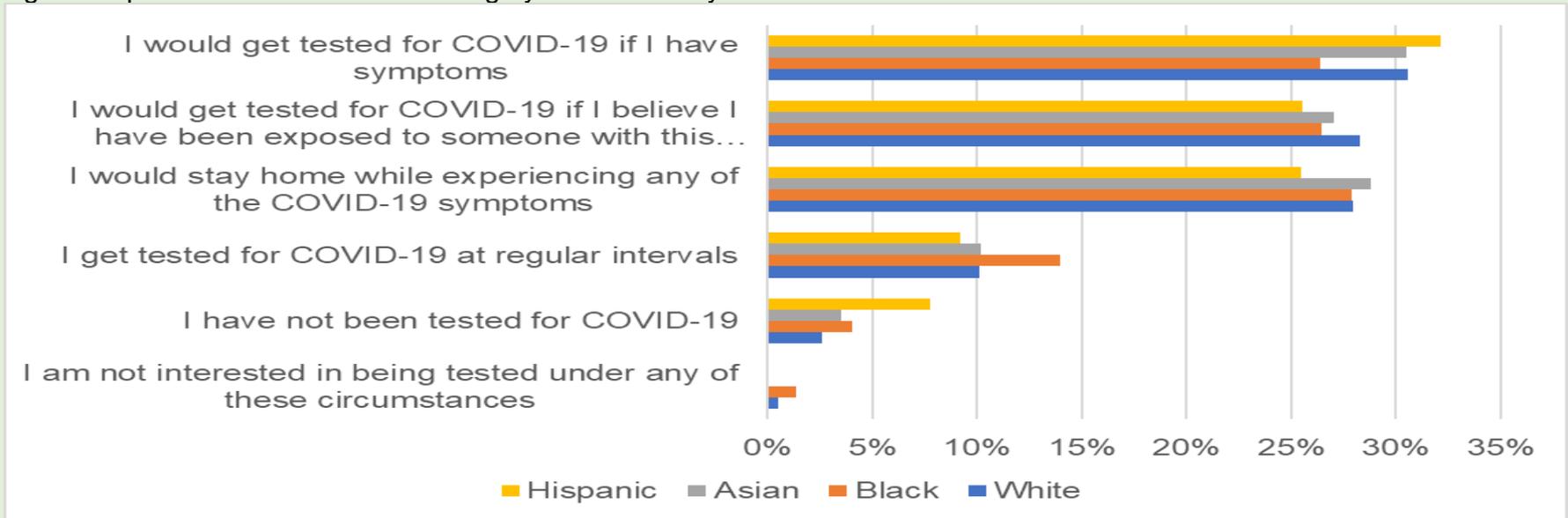


Fig 53. Experience in COVID-19 Testing by Race/ethnicity



The results of experience in COVID-19 testing by PCSA areas are in Table 22. Olney/Damascus PCSA area had most % not been tested (5.7%) among all PCSA areas, while Germantown/Gaithersburg/Poolesville PCSA area had most % tested at regular intervals (11.3%).

Table 22. Experience in COVID-19 Testing by PCSA Areas

Experience in COVID-19 Testing	PCSA Areas			
	Germantown/Gaithersburg/Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/Takoma Park
Tested at regular intervals	14.02 (6.63-21.42)	9.49 (6.88-12.10)	8.87 (5.84-11.89)	11.28 (6.22-16.35)
Not been tested	2.80 (.20-5.40)	5.71 (0-12.75)	2.95 (.66-5.23)	2.65 (.29-5.01)
Would get tested if exposed	27.46 (16.88-38.05)	24.31 (18.16-30.47)	28.16 (21.50-34.82)	28.24 (19.32-37.16)
Would get tested if symptoms	29.53 (19.22-39.84)	30.24 (21.90-38.58)	31.10 (24.09-38.11)	30.45 (20.42-40.49)
Not interested in being tested	0.65 (0-1.92)	0.89 (.17-1.62)	0.25 (0-.69)	0.79 (0-2.55)
Would stay home if symptomatic	25.53 (16.87-34.19)	29.36 (22.30-36.41)	28.67 (22.50-34.85)	26.58 (19.30-33.87)

V. Health Status and Health Related Behaviors

Physical Activities

23.5% of all residents that completed the survey did not participate in any physical activity outside work during the past month (Fig 54). Men (81.8%) had higher % of physical activities than women (71.9%) (Fig 55).

Fig 54. Physical Activity

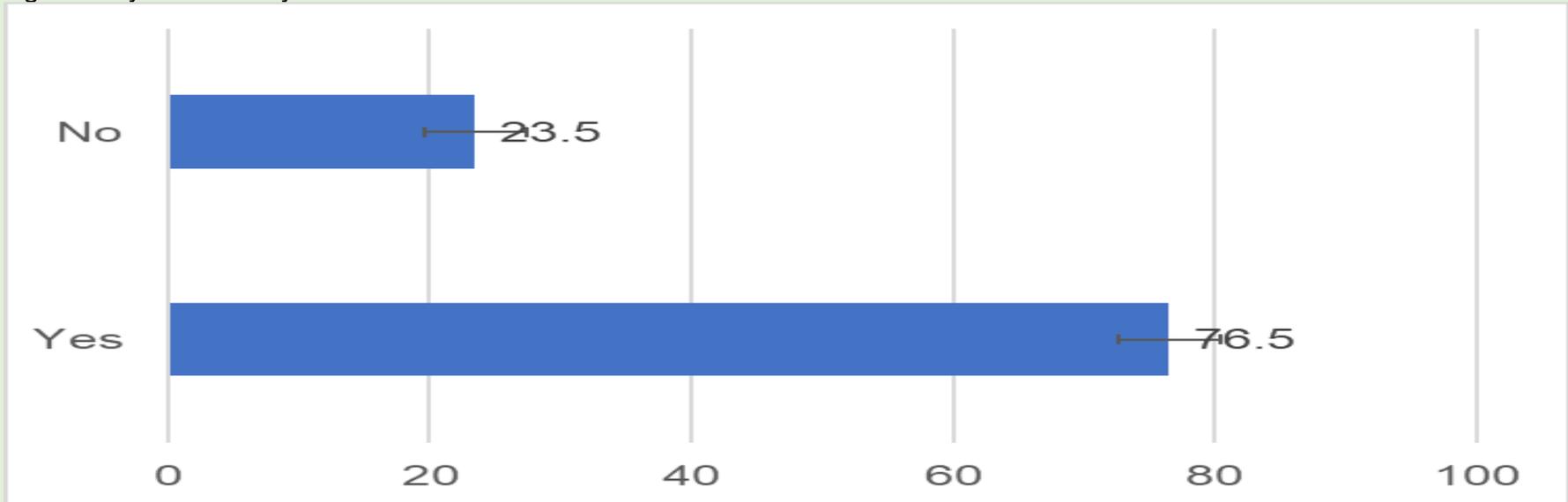
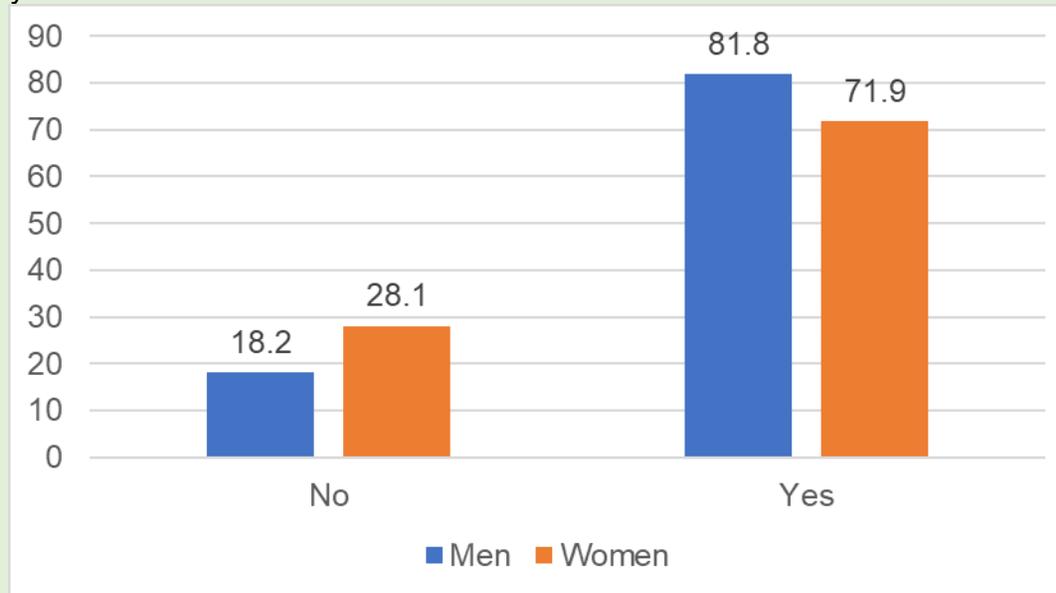


Fig 55. Physical Activity by Sex



Results of physical activities by age are in Fig 56. Both aged 18-34 (78.2%) and aged 35-64 (78.5%) had higher % of physical activities, while aged 65+ had lower (69.5%). Results of physical activities by race/ethnicity are in Fig 57. Whites (80.2%) had the most physical activities, while Hispanics (59%) had the lowest.

Fig 56. Physical Activity by Age

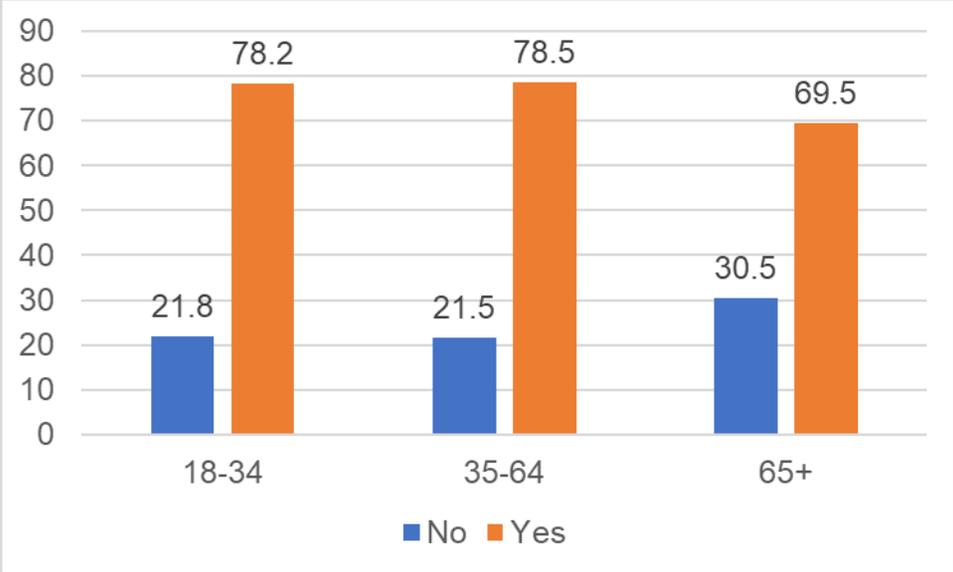
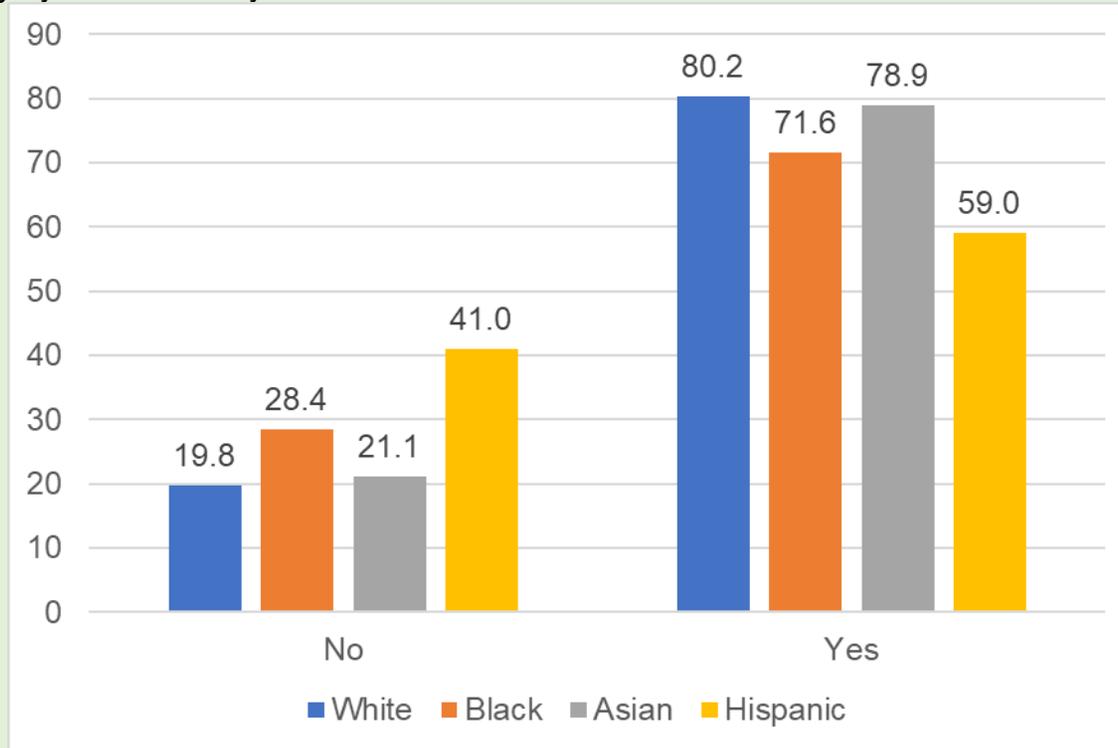


Fig 57. Physical Activity by Race/ethnicity



The results of physical activities by PCSA areas are in Table 23. Rockville/Washington PCSA area (83.0%) had the highest % of physical activities while Germantown/Gaithersburg/Poolesville PCSA area (63.3%) had the lowest.

Table 23. Physical Activities by PCSA Areas

Physical Activities	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Yes	63.3 (35.17-91.41)	72.6 (51.23-94.01)	83.0 (74.10-91.97)	82.4 (75.79-88.94)
No	36.7 (8.59-64.83)	27.4 (5.99-48.77)	17.0 (8.03-25.90)	17.6 (11.06-24.21)

Alcohol Consumption

Overall, 61.6% of the survey respondents assumed that they had at least one drink alcoholic beverage in the past 30 days (Fig 58). Men (67.3%) had higher % of alcohol consumption than women (58.2%) (Fig 59).

Fig 58. Alcohol Consumption

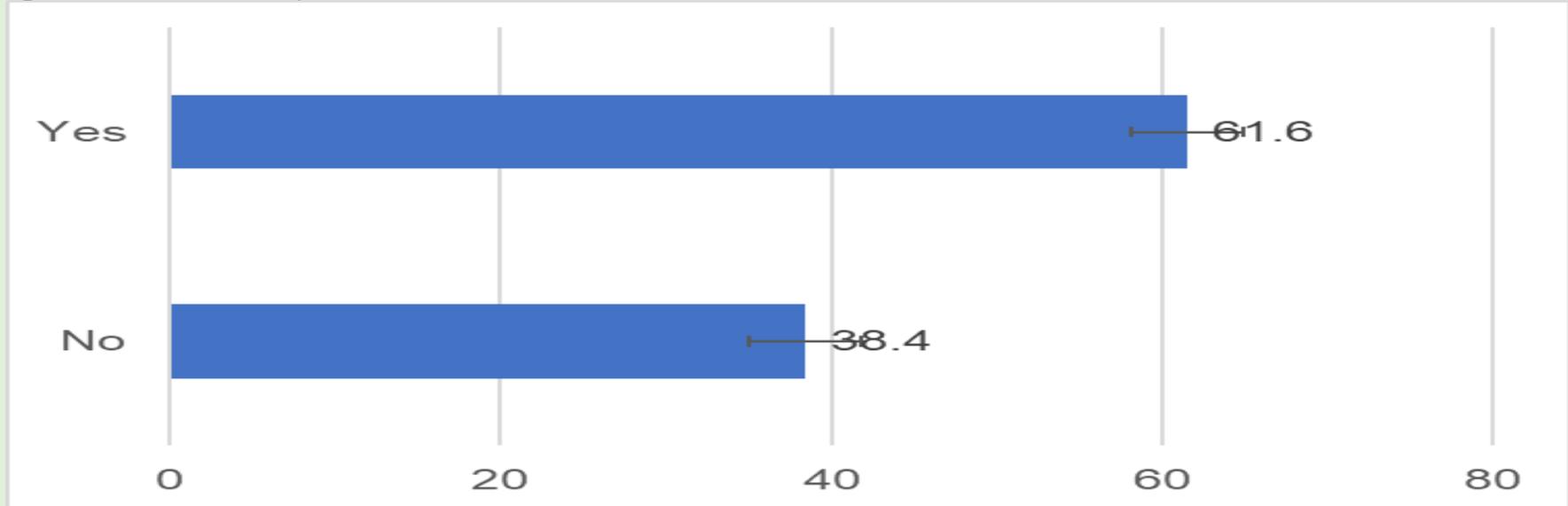
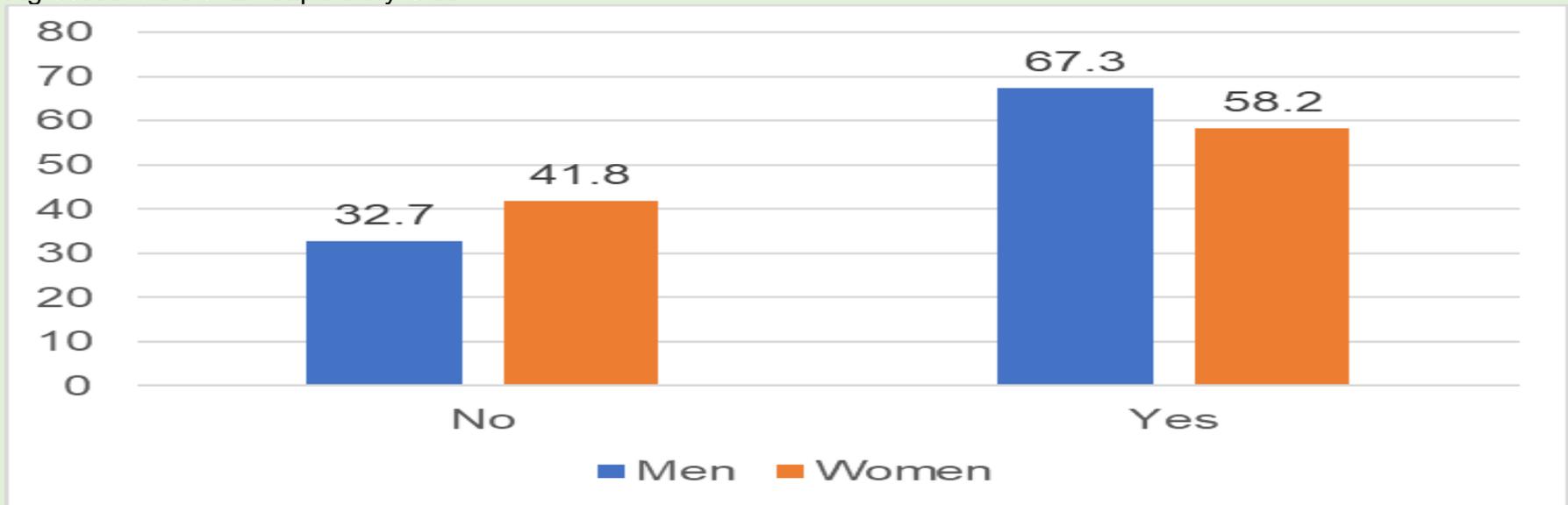


Fig 59. Alcohol Consumption by Sex



20.6% of residents aged between 18 and 34, 31.9% aged between 35 and 64, and 9.7% of those over 65 years old reported that they have consumed alcohol in the past 30 days (Fig 60). 6.8% African American/Black, 5.5% Asian/Pacific Islander, 34.1% White/Caucasian, 2.2%, and 11.5% Hispanic or Latino residents reported that they have consumed alcoholic drink in the last 30 days (Fig 61).

Fig 60. Alcohol Consumption by Age

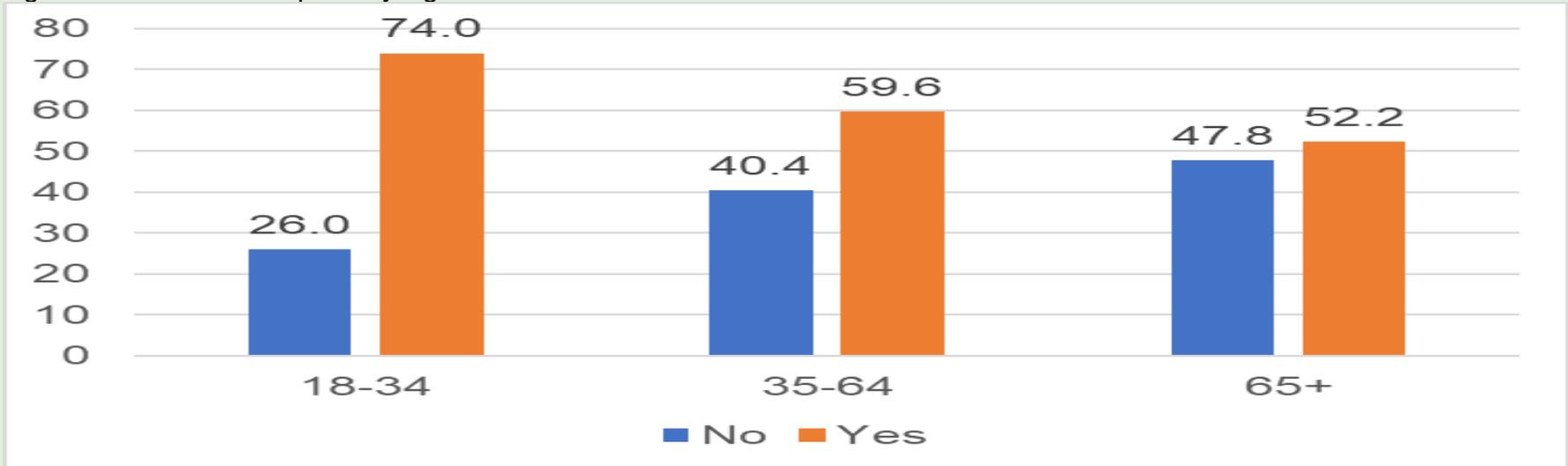
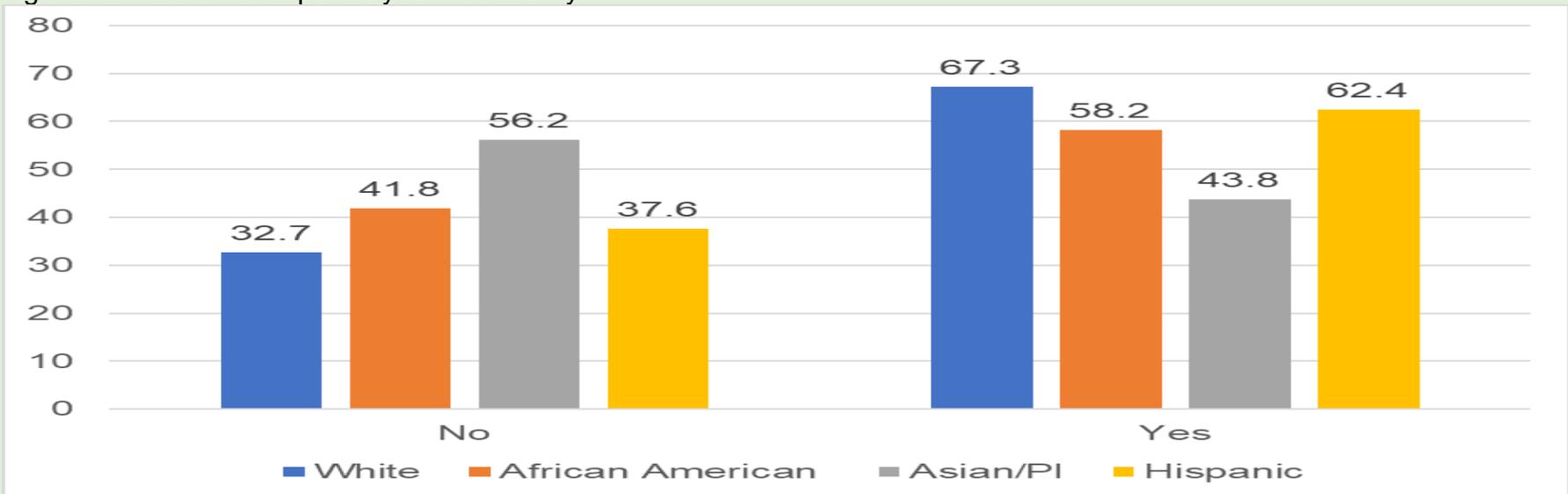


Fig 61. Alcohol Consumption by Race/ethnicity



Cholesterol Monitoring

7.6% of respondents have never checked their blood cholesterol (Fig 62). 8.8% of men and 5.6% of women have never had blood cholesterol checked (Fig 63).

Fig 62. Cholesterol Monitoring

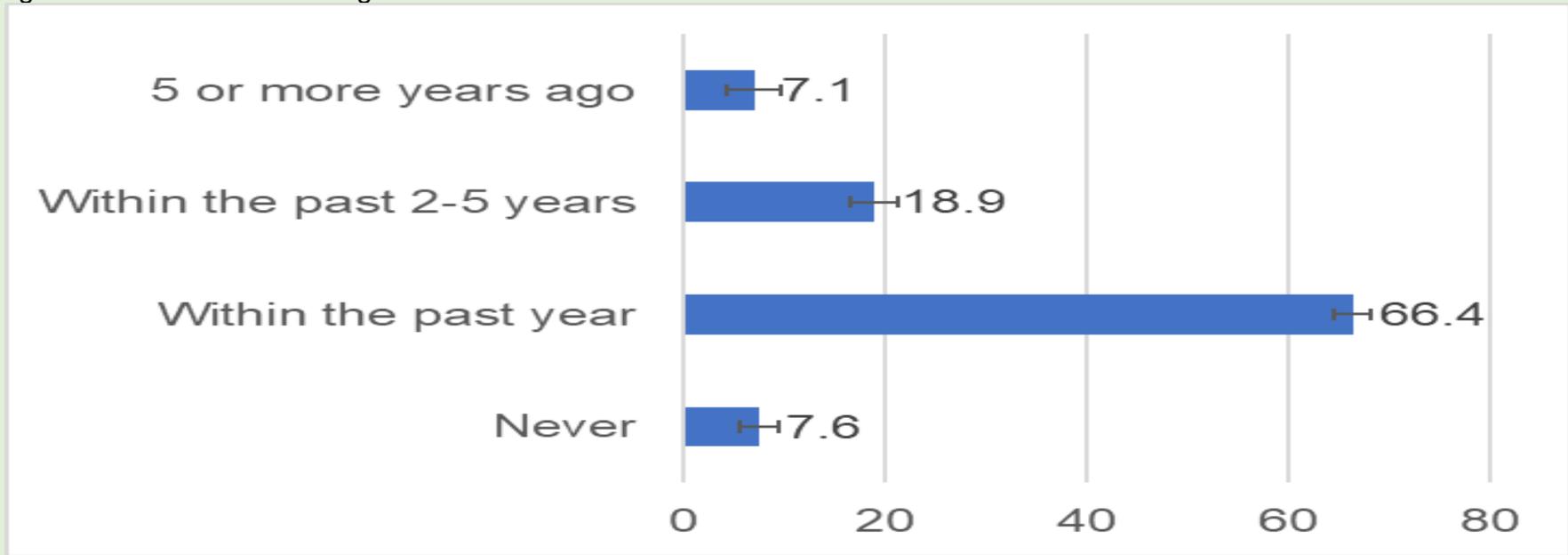
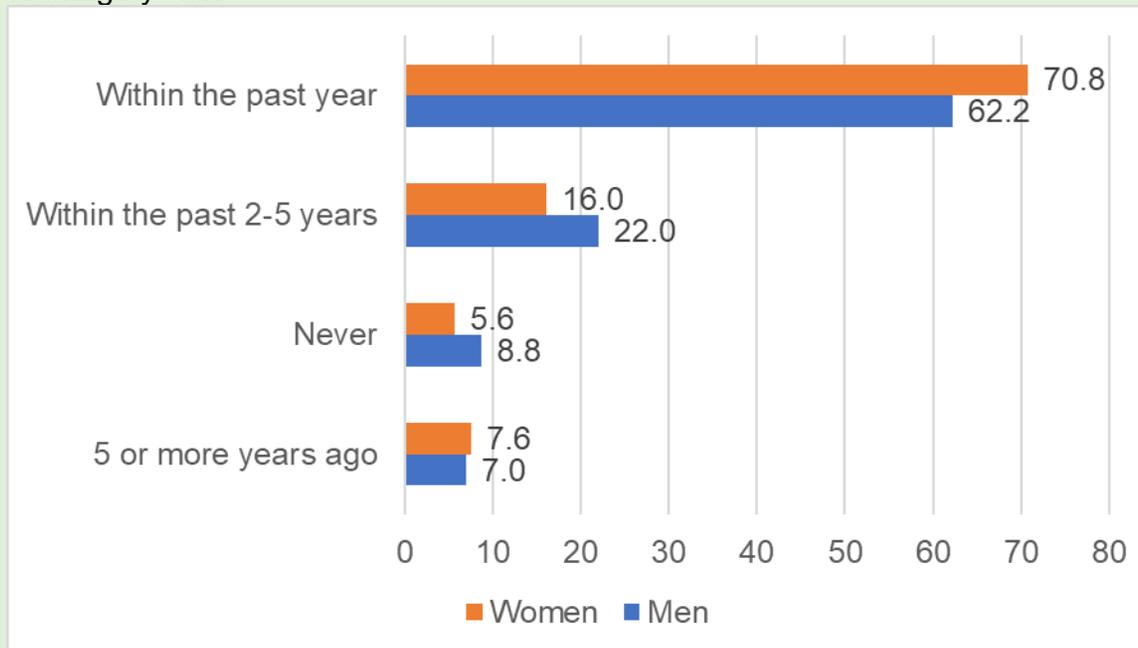


Fig 63. Cholesterol Monitoring by Sex



15.7% of adults between age 18 and 34, 5.2% of those between age 35 and 64 and 2.2% of those over 65 years old reported that they had never had blood cholesterol checked (Fig 64). 6.8% of white residents reported that they had never had blood cholesterol checked compared to 8.4% of African Americans, 4.9% of Hispanics and 13.6% of Asians (Fig 65).

Fig 64. Cholesterol Monitoring by Age

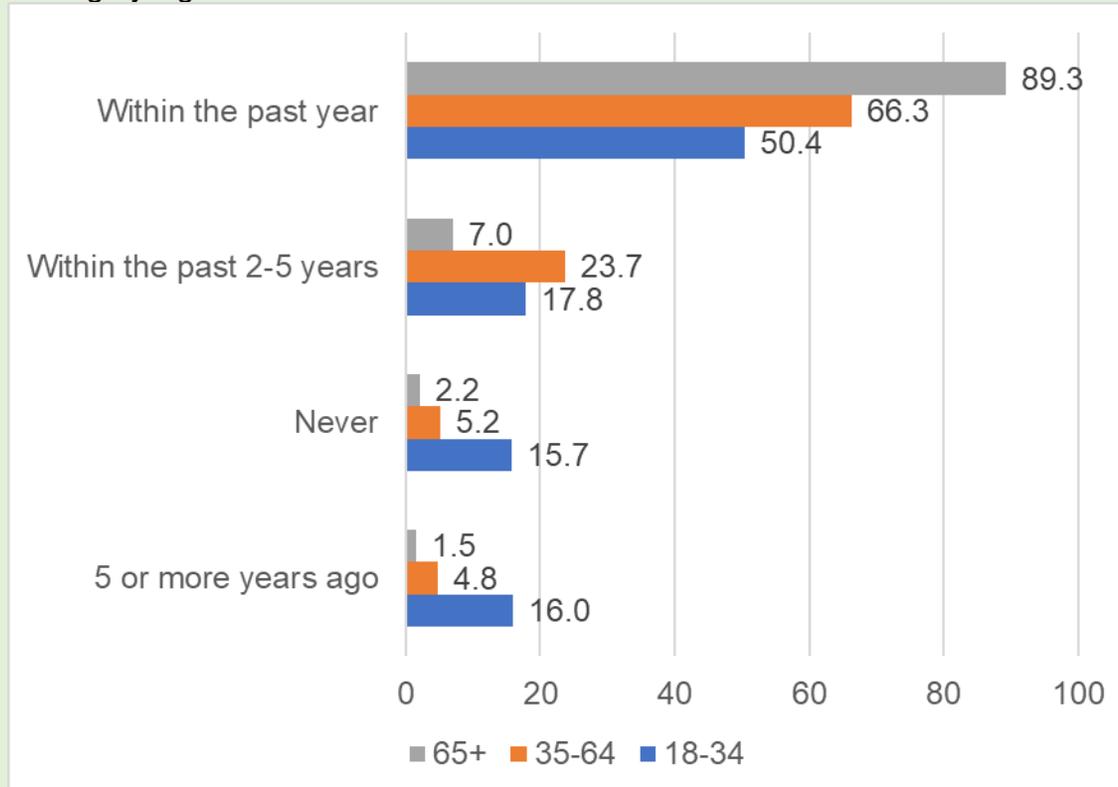
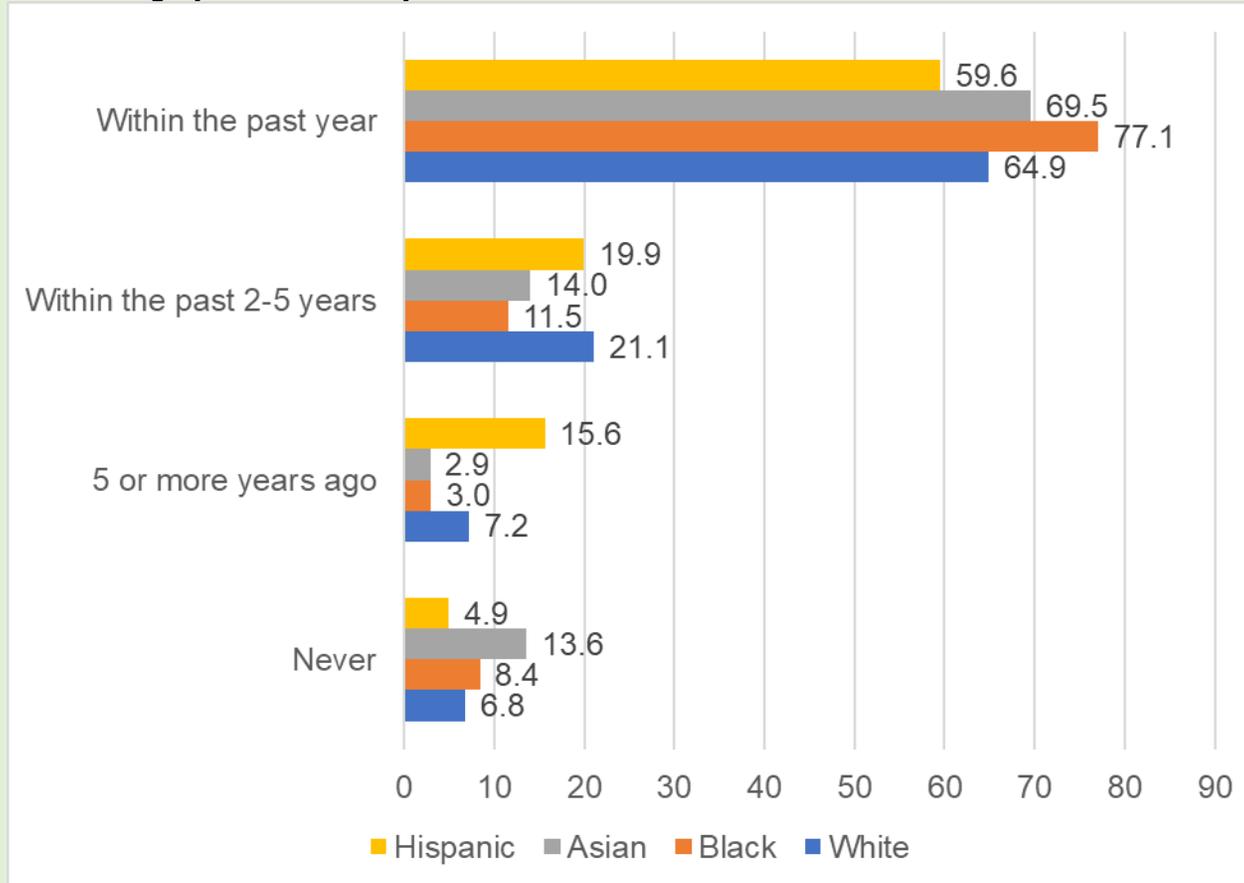


Fig 65. Cholesterol Monitoring by Race/ethnicity



The results of cholesterol monitoring by PCSA areas are in Table 24. While Silver Spring/Takoma Park PCSA area had the highest % cholesterol monitoring within the past year (71.0%), Rockville/Washington PCSA area had the highest % never having it monitored (8.5%).

Table 24. Cholesterol Monitoring by PCSA Areas

Cholesterol monitoring	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Never	6.9 (0-17.46)	5.7 (0-13.03)	8.5 (0.96-16.03)	8.1 (0.90-15.28)
Within the past year	60.8 (52.43-69.21)	62.5 (54.58-70.37)	69.8 (61.64-77.98)	71.0 (66.14-75.90)
Within the past 2-5 years	14.4 (6.80-22.0)	23.5 (14.91-32.09)	18.8 (7.43-30.13)	17.5 (8.81-26.19)
5 or more years ago	17.9 (3.81-32.03)	8.3 (0-24.45)	2.9 (0-7.84)	3.4 (1.75-5.02)

Chronic Conditions

Results of chronic conditions are in Table 25. Among chronic health conditions, depressive disorder (25.7%), arthritis (21.7%), and diabetes (15.9%) are among the top 3 conditions.

Table 25. Chronic Conditions

Health Condition	Overall
Heart attack, stroke	3.88 (1.97-5.8)
Angina/ coronary heart disease	3.77 (2.04-5.51)
Asthma	11.77 (7.76-15.77)
Cancer	11.18 (8.63-13.72)
COPD	3.28 (0-6.68)
Arthritis	21.66 (17.25-26.08)
Depressive disorder	25.67 (18.56-32.78)
Kidney disease	2.86 (0.69-5.03)
Diabetes	15.92 (10.88-20.96)

* Top 3 are highlighted

Results of chronic conditions by sex are in Table 26. Depressive disorder (26.7%, 24.6%), arthritis (16.5%, 25.3%), and diabetes (19.4%, 13.5%) are also among top 3 conditions for both men and women respectively.

Table 26. Chronic Conditions by Sex

Health Condition	Sex	
	Men	Women
Heart attack, stroke	5.76 (1.65-9.87)	2.70 (0.66-4.74)
Angina/ coronary heart disease	5.19 (1.93-8.46)	2.89 (0.50-5.29)
Asthma	9.65 (3.72-15.58)	13.05 (7.91-18.19)
Cancer	10.49 (5.2-15.78)	11.9 (8.96-14.84)
COPD	4.55 (0-13.05)	2.48 (1.44-3.52)
Arthritis	16.45 (9.48-23.42)	25.31 (17.83-32.78)
Depressive disorder	26.65 (13.55-39.75)	24.58 (15.8-33.36)
Kidney disease	1.82 (0.48-3.16)	3.57 (0.35-6.78)
Diabetes	19.43 (10.59-28.28)	13.53 (6.67-20.38)

* Top 3 are highlighted

Results of chronic conditions by age are in Table 27. While depressive disorder is the most common condition for aged 18-34 (60.7%) and aged 35-64 (27.2%), arthritis is the most common condition for aged 65+ (29.7%).

Table 27. Chronic Conditions by Age

Health Condition	Age		
	18-34	35-64	65+
Heart attack, stroke	1.89 (0-5.60)	1.89 (0.25-3.54)	7.85 (3.46-12.23)
Angina/ coronary heart disease	0	1.02 (0-2.36)	9.69 (4.77-14.61)
Asthma	13.35 (0-30.61)	15.63 (8.88-22.38)	5.92 (3.24-8.60)
Cancer	6.74 (0-15.60)	8.85 (4.07-13.63)	16.36 (10.32-22.40)
COPD	0	3.46 (0-10.66)	4.46 (2.24-6.68)
Arthritis	3.8 (0-12.15)	21.90 (14.05-29.75)	29.71 (23.59-35.83)
Depressive disorder	60.72 (20.92-100.52)	27.18 (18.81-35.55)	7.21 (3.29-11.13)
Kidney disease	0	3.41 (0-7.38)	3.63 (1.39-5.87)
Diabetes	13.51 (0-35.18)	16.67 (8.75-24.58)	15.17 (9.97-20.41)

* Top 3 are highlighted

Results of chronic conditions by race/ethnicity are in Table 28. Arthritis is the among most common condition across all race/ethnicity groups. While diabetes is also among the top health condition for African American (22.1%), Asian (34.6%), and Hispanics (25.3%), depressive disorder is another top health condition for Whites (33.5%).

Table 28. Chronic Conditions by Race/ethnicity

Health Condition	Race/ethnicity			
	White	African American	Asian	Hispanic
Heart attack, stroke	4.68 (2.14-7.22)	2.73 (0-5.67)	7.58 (1.78-13.38)	5.10 (0-13.34)
Angina/ coronary heart disease	4.26 (2.05-6.47)	1.60 (0-4.27)	3.57 (0-8.70)	2.79 (0-8.40)
Asthma	10.35 (3.84-16.85)	15.31 (1.07-29.55)	7.69 (0-15.85)	10.37 (0-22.60)
Cancer	13.36 (8.81-17.92)	10.51 (3.01-18.01)	7.71 (0-16.99)	8.35 (1.66-15.03)
COPD	4.51 (0-10.96)	1.58 (0-3.26)	2.53 (0-7.43)	1.14 (0-3.85)
Arthritis	19.86 (14.34-25.38)	26.18 (10.09-42.28)	21.33 (3.65-39.02)	19.68 (7.49-31.87)
Depressive disorder	33.46 (21.51-45.40)	14.94 (0-30.12)	9.29 (0.19-18.40)	24.27 (4.82-43.71)
Kidney disease	1.48 (0.16-2.80)	5.11 (0-13.60)	5.7 (0.64-10.75)	2.97 (0-8.60)
Diabetes	8.06 (4.15-11.96)	22.05 (7.68-36.41)	34.60 (7.62-61.57)	25.33 (4.20-46.47)

* Top 3 are highlighted

The results of chronic conditions by PCSA areas are in Table 29. Arthritis is the among the most common health condition across all PCSA areas. While diabetes is another top health condition for Germantown/Gaithersburg/Poolsville (20.2%), Olney/Damascus (18.3%), and Silver Spring/Takoma Park (16.4%) PCSA areas, depressive disorder is for Rockville/Washington PCSA area (34.2%).

Table 29. Chronic Conditions by PCSA Areas

Chronic Condition	PCSA Areas			
	Germantown/Gaithersburg/ Poolsville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Angina/coronary heart disease	2.7 (0, 6.17)	4.6 (1.17, 7.95)	3.6 (1.47, 5.81)	3.9 (0, 8.22)
Arthritis, rheumatoid arthritis, gout, lupus or fibromyalgia	25.3 (13.83, 36.67)	18.5 (10.48, 26.61)	18.8 (13.22, 24.37)	26.2 (15.26, 37.18)
Asthma	18.1 (4.49, 31.62)	10.3 (3.36, 17.15)	11.3 (3.63, 18.93)	9.6 (2.81, 16.37)
Cancer	9.9 (4.09, 15.62)	7.4 (3.88, 10.85)	15.2 (8.65, 21.78)	11.4 (5.81, 17.02)
COPD, emphysema or chronic bronchitis	1.7 (0, 4.79)	7.4 (0, 19.50)	1.3 (.57, 2.12)	1.9 (.93, 2.91)
Depressive disorder	12.3 (3.88, 20.69)	26.2 (13.56, 38.88)	34.2 (12.68, 55.61)	24.1 (10.14, 37.95)
Diabetes	20.2 (3.64, 36.66)	18.3 (9.96, 26.63)	11.1 (2.01, 20.13)	16.4 (5.12, 27.57)
Heart attack, stroke	2.8 (0, 6.31)	5.7 (1.72, 9.75)	3.1 (0, 7.47)	3.6 (1.70, 5.54)
Kidney disease	7.3 (0, 18.08)	1.7 (0, 4.10)	1.4 (0, 2.79)	2.9 (.94, 4.86)

* Top 3 are highlighted

Dental Visits

10.4% of respondents last visited a dentist or dental clinic for any reason 5 or more years ago. 2.0% of all residents who completed the survey reported that they have never been to the dentist (Fig 66). 2.3% of men and 1.7% of women reported that they have never been to the dentist (Fig 67).

Fig 66. Dental Visits

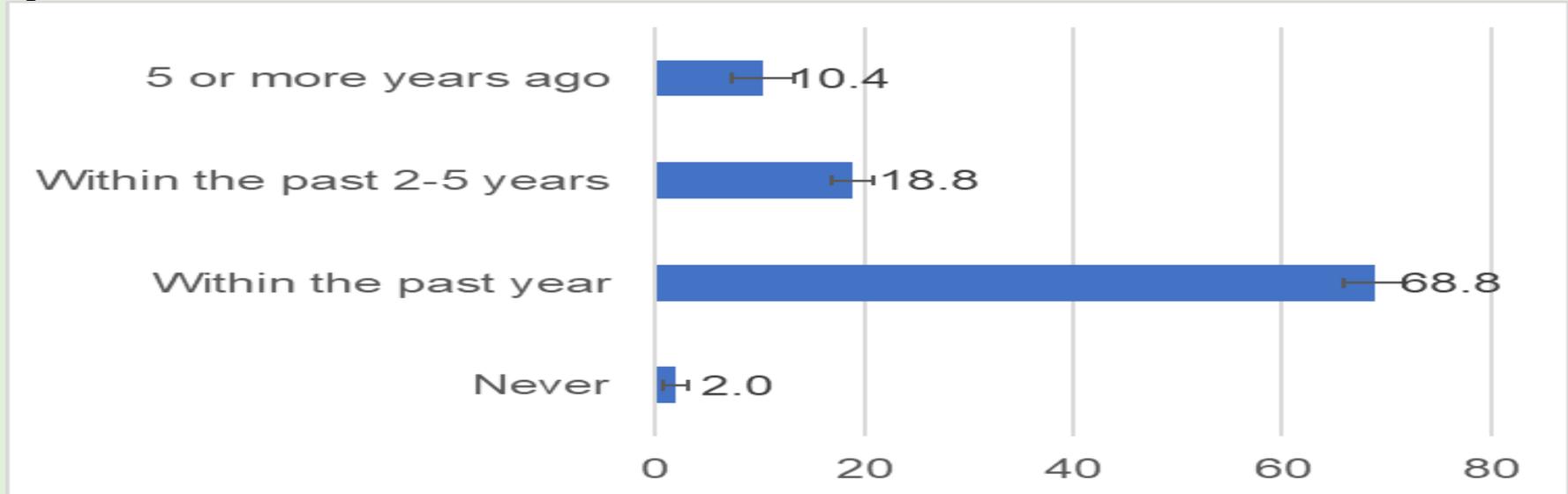
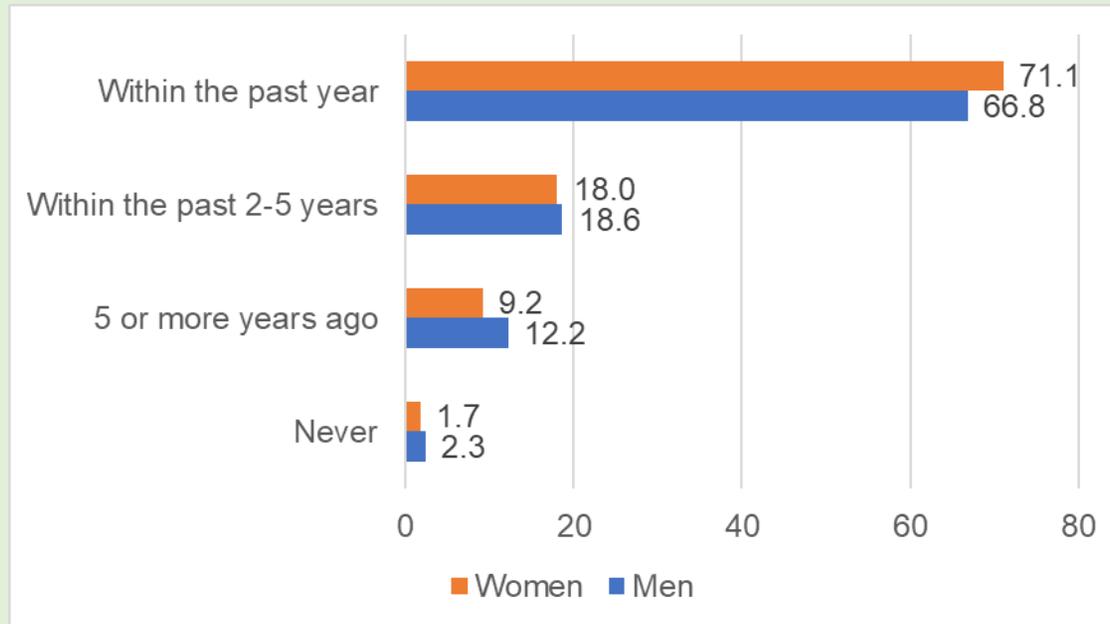


Fig 67. Dental Visits by Sex



2.8% of residents aged between 18 and 34, 2% of residents aged between 35 and 64, and 0.3% of those 65 years and older reported that they have never been to the dentist (Fig 68). 0.8% of white residents reported that they have never been to the dentist compared to 8.3% of African American residents and 2.8% of Asian Americans (Fig 69).

Fig 68. Dental Visit by Age

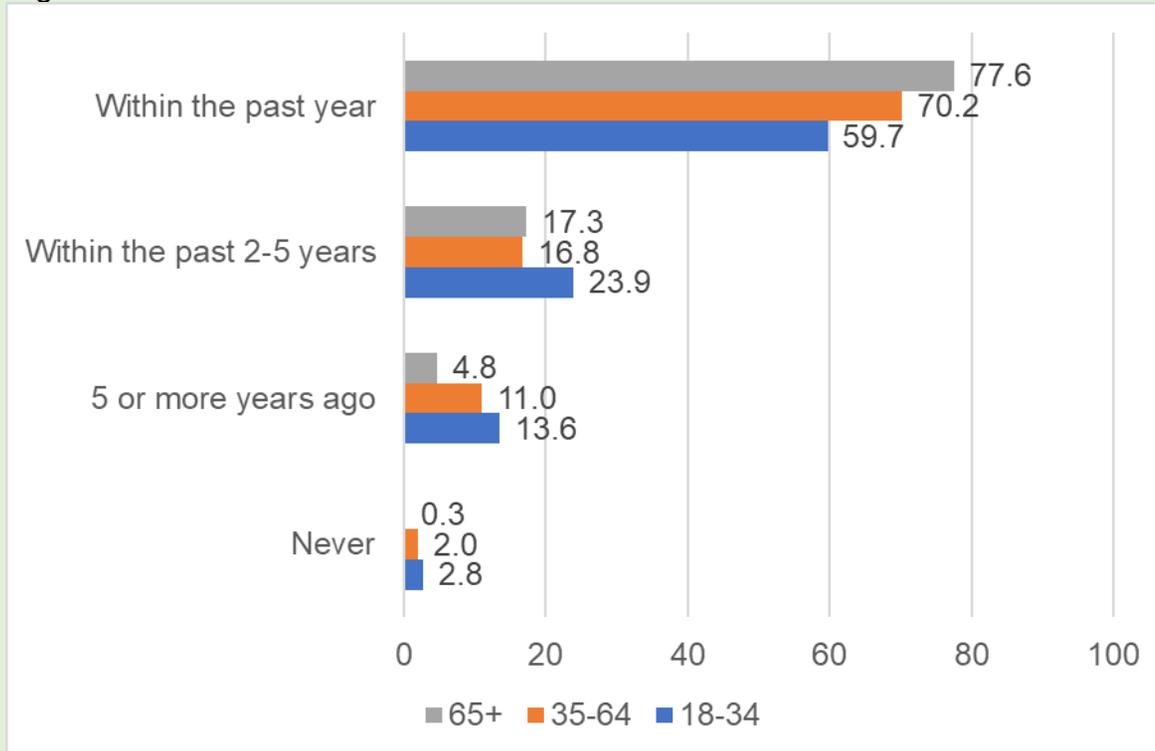
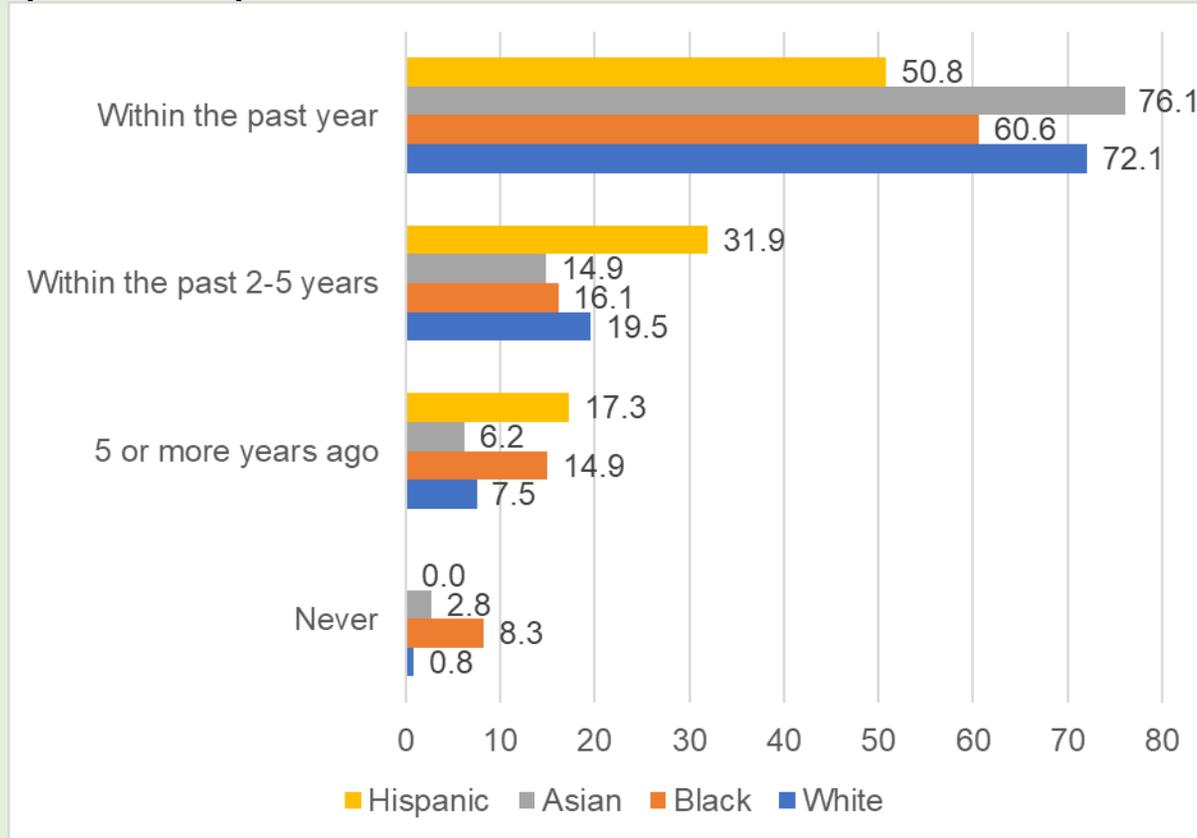


Fig 69. Dental Visits by Race/ethnicity



The results of dental visits by PCSA areas are in Table 30. While Rockville/Washington PCSA area had the highest % dental visits within the past year (83.2%), Silver Spring/Takoma Park PCSA area had the highest % never having dental visits (5.6%).

Table 30. Dental Visits by PCSA Areas

	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Never	1.8 (0-6.63)	1.0 (0-3.81)	0.5 (0-1.71)	5.6 (0-13.62)
Within the past year	52.6 (39.74-65.41)	62.3 (48.20-76.31)	83.2 (72.57-93.79)	67.1 (59.46-74.74)
Within the past 2-5 years	34.4 (25.55-43.26)	20.5 (9.38-31.68)	9.4 (6.57-12.25)	17.7 (8.94-26.50)
5 or more years ago	11.2 (7.62-14.83)	16.2 (0-37.95)	6.9 (0-15.79)	9.6 (1.01-18.18)

Smoking

2.6% of respondents that completed the survey reported that they smoke everyday (Fig 70). 3.1% of men and 2.3% of women reported that they smoke everyday (Fig 71).

Fig 70. Smoking

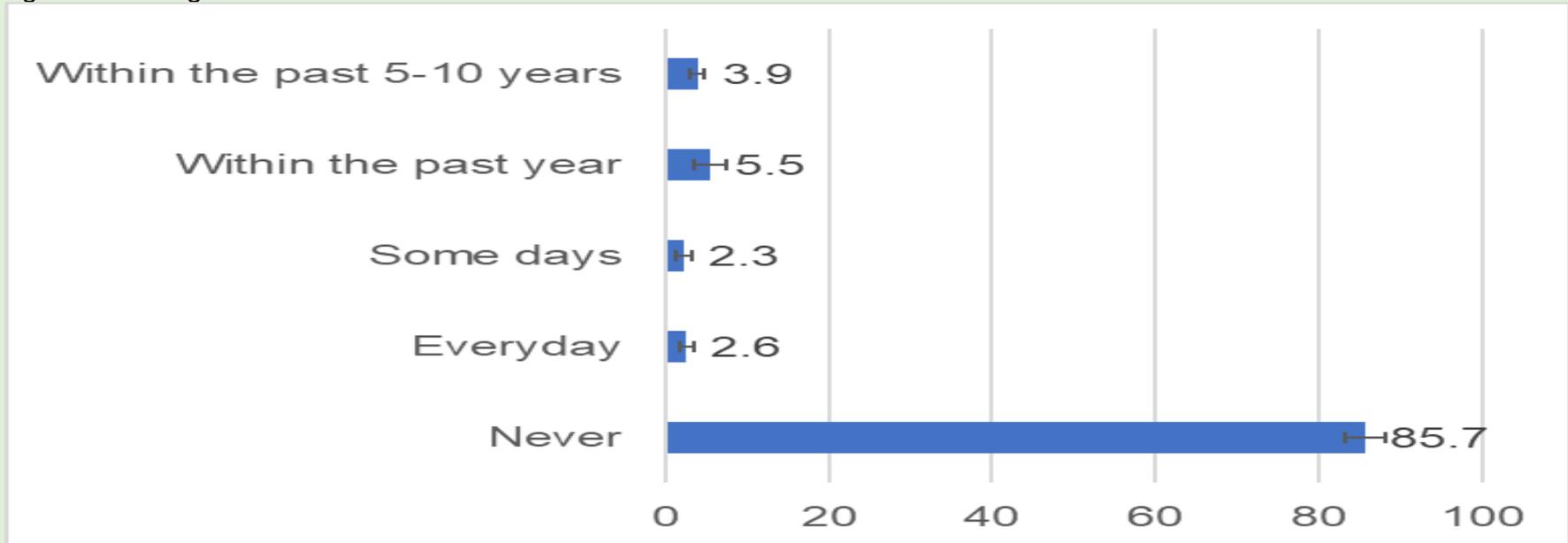
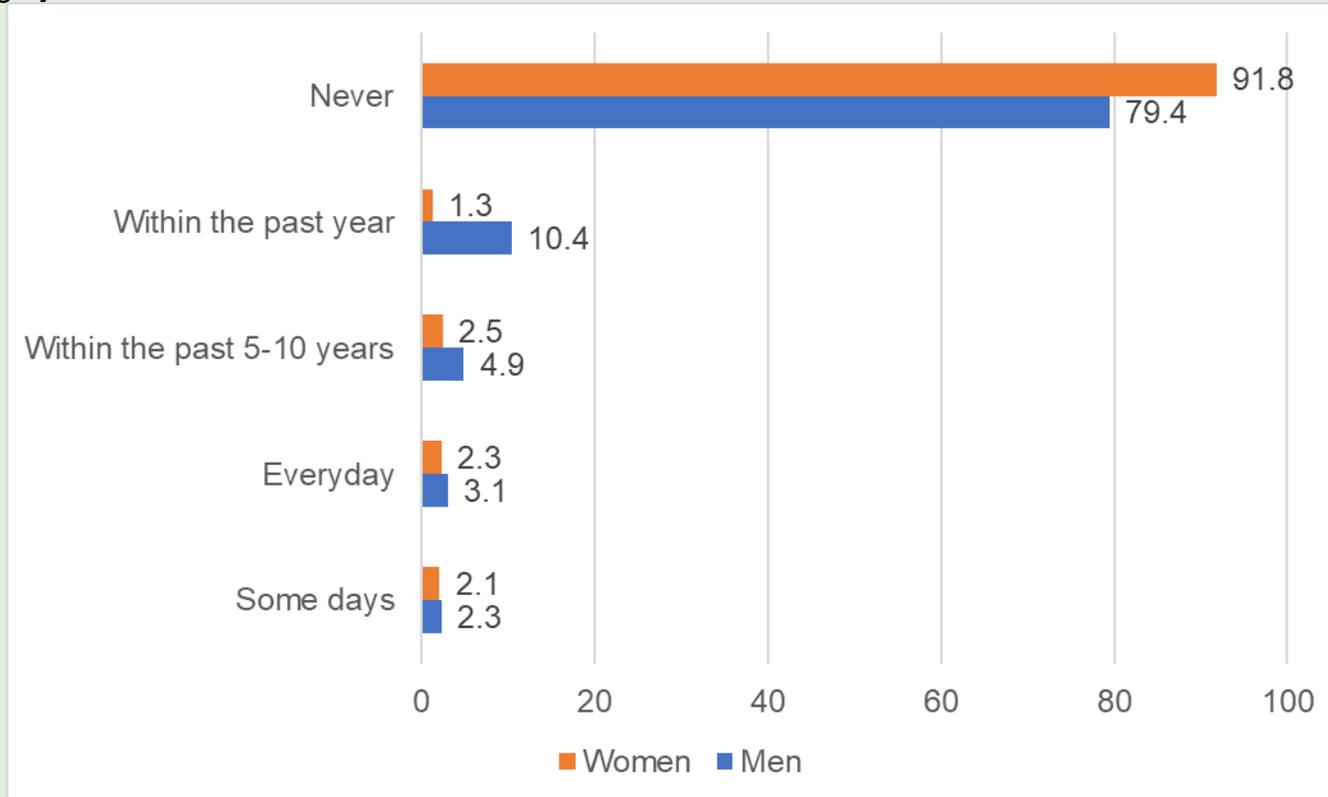


Fig 71. Smoking by Sex



0.8% of residents aged 18 to 34, 3.5% of residents aged 35 to 64, and 3.0% of those 65 and older reported that they smoke everyday (Fig 72). 1.8% of white residents, 5.6% of African American residents, and 0.4% of Asian residents reported that they smoke everyday (Fig 73).

Fig 72. Smoking by Age

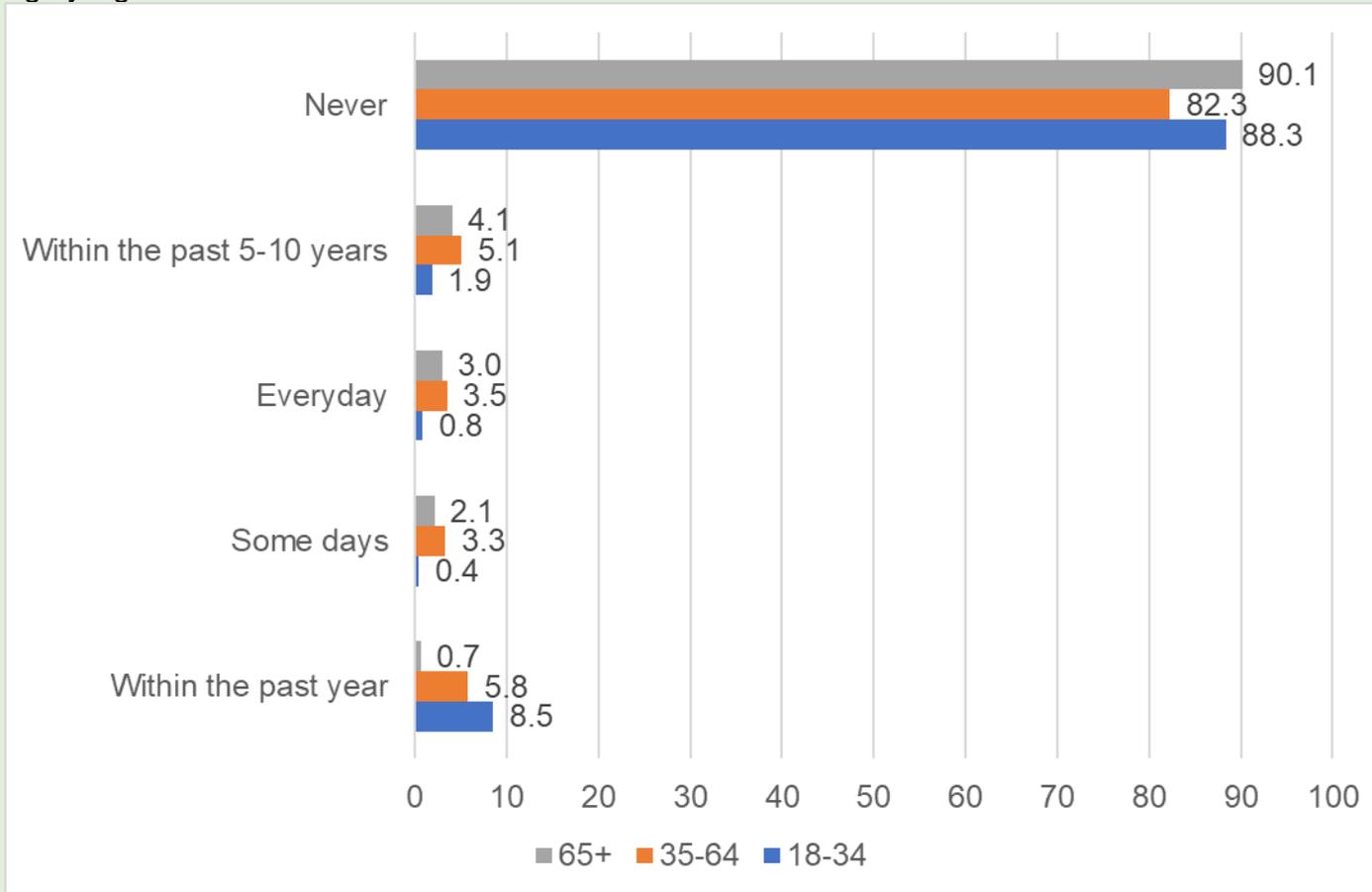
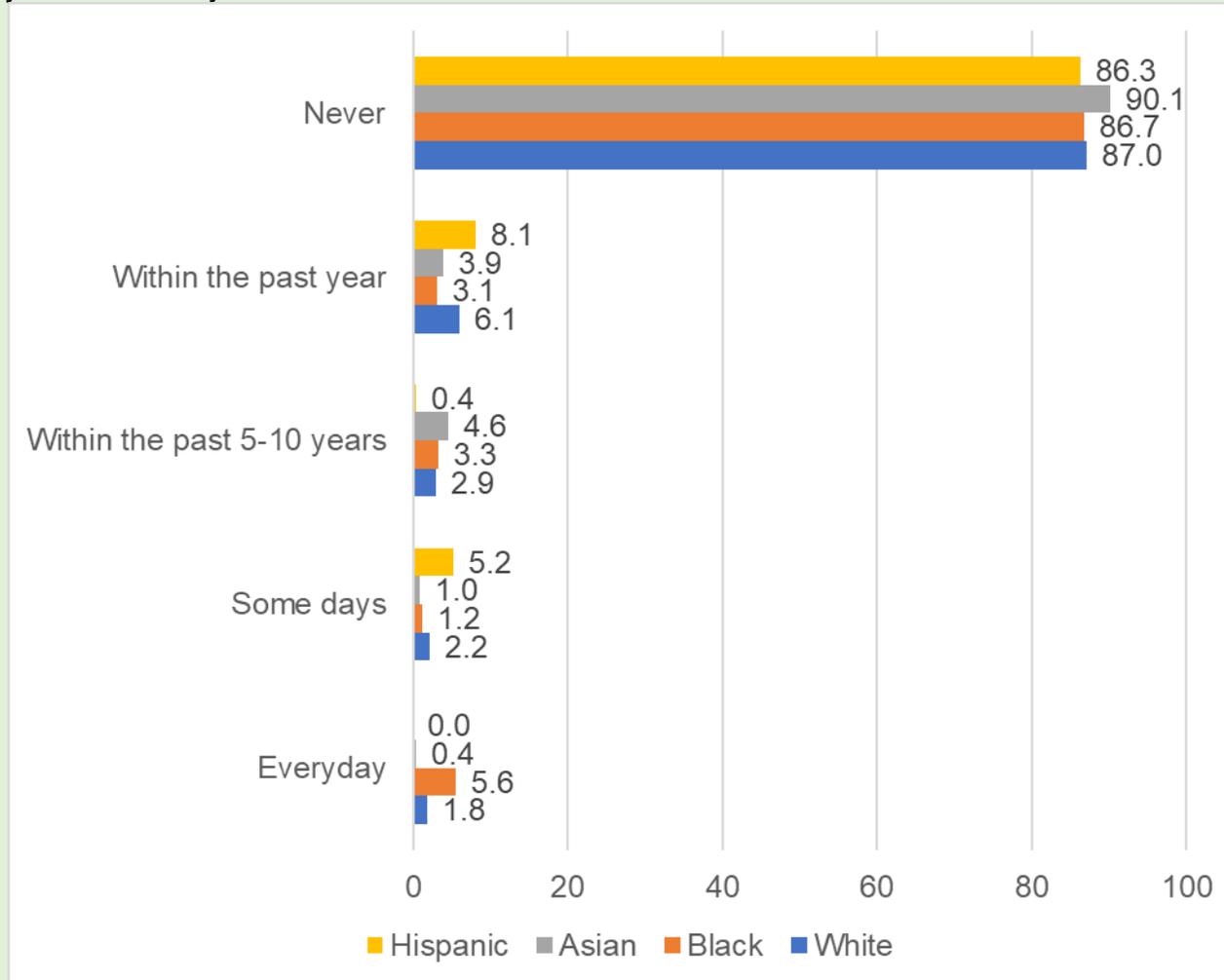


Fig 73. Smoking by Race/ethnicity



The results of smoking by PCSA areas are in Table 31. While Rockville/Washington PCSA area had the highest % never smoking (89.4%) among all PCSA areas, Silver Spring/Takoma park PCSA area had the highest smoking everyday (4.8%).

Table 31. Smoking by PCSA Areas

Smoking	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Never	88.9 (78.77-98.97)	75.9 (56.33-95.45)	89.4 (83.11-95.71)	86.6 (81.33-91.83)
Every day	0.3 (0-0.87)	3.6 (0-8.91)	2.0 (0-5.40)	4.8 (0.23-9.39)
Some days	2.2 (0-5.46)	4.2 (0-10.30)	2.1 (0-4.98)	0.4 (0-1.13)
Within the past year	4.8 (0.48-9.14)	10.8 (0-27.88)	4.2 (0-8.50)	2.9 (0-7.09)
Within the past 5-10 years	3.8 (0-8.64)	5.5 (2.13-8.83)	2.3 (0-4.63)	5.2 (0.38-10.12)

E-cigarette/Vaping Use

10.2% of all survey respondents used an e-cigarette or other electronic vaping product at some point in their life (Fig 74). 13.3% of men and 6.9% of women reported to have used an e-cigarette or other electronic vaping product (Fig 75).

Fig 74. E-cigarette/Vaping Use

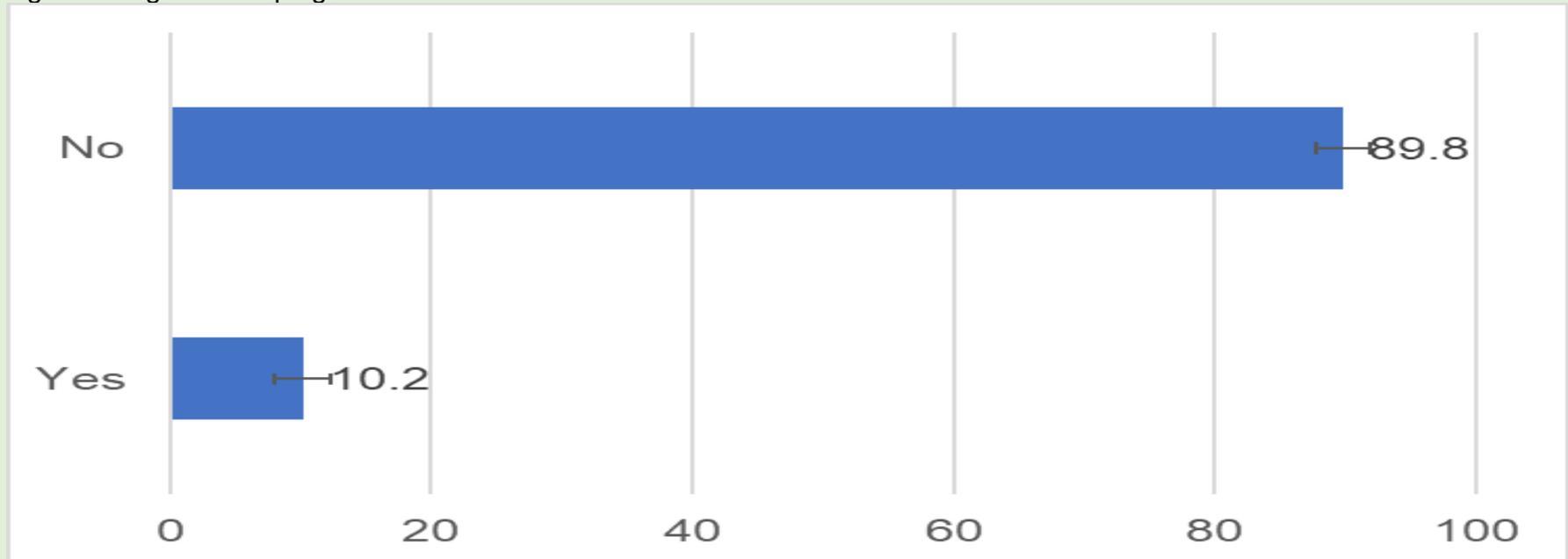
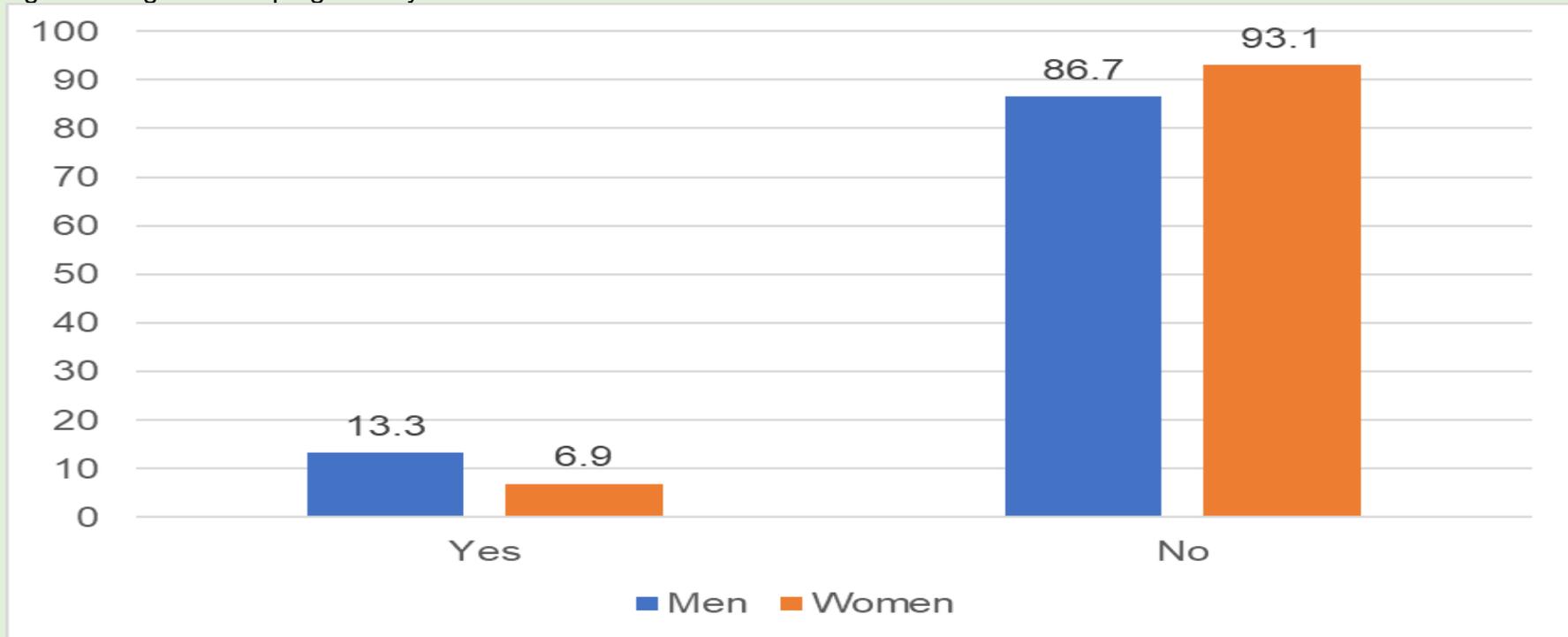


Fig 75. E-cigarette/Vaping Use by Sex



16.3% of those between age 18 and 34, 10% of those between age 35 and 64, and 2.8% of those 65 years and older reported to have used an e-cigarette or other electronic vaping product (Fig 76). 14.2% of white residents reported to have used an e-cigarette or other electronic vaping product compared to 9.3% of African Americans, 3.7% of Hispanics and 4.8% of Asians (Fig 77).

Fig 76. E-cigarette/Vaping Use by Age

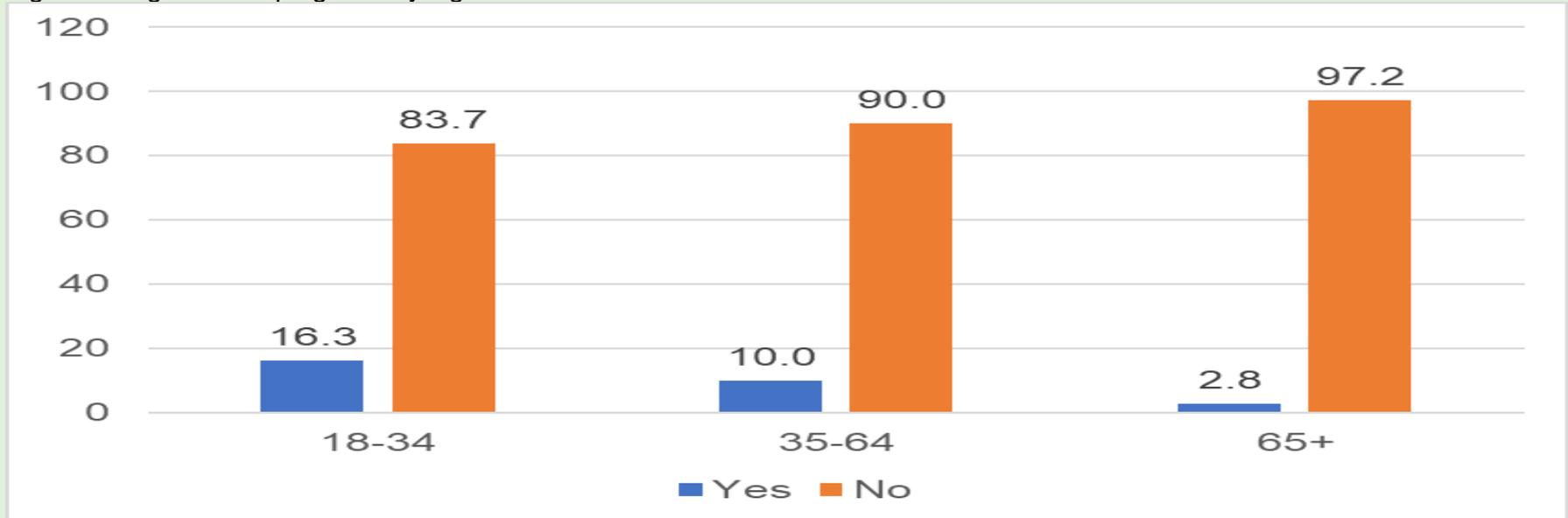
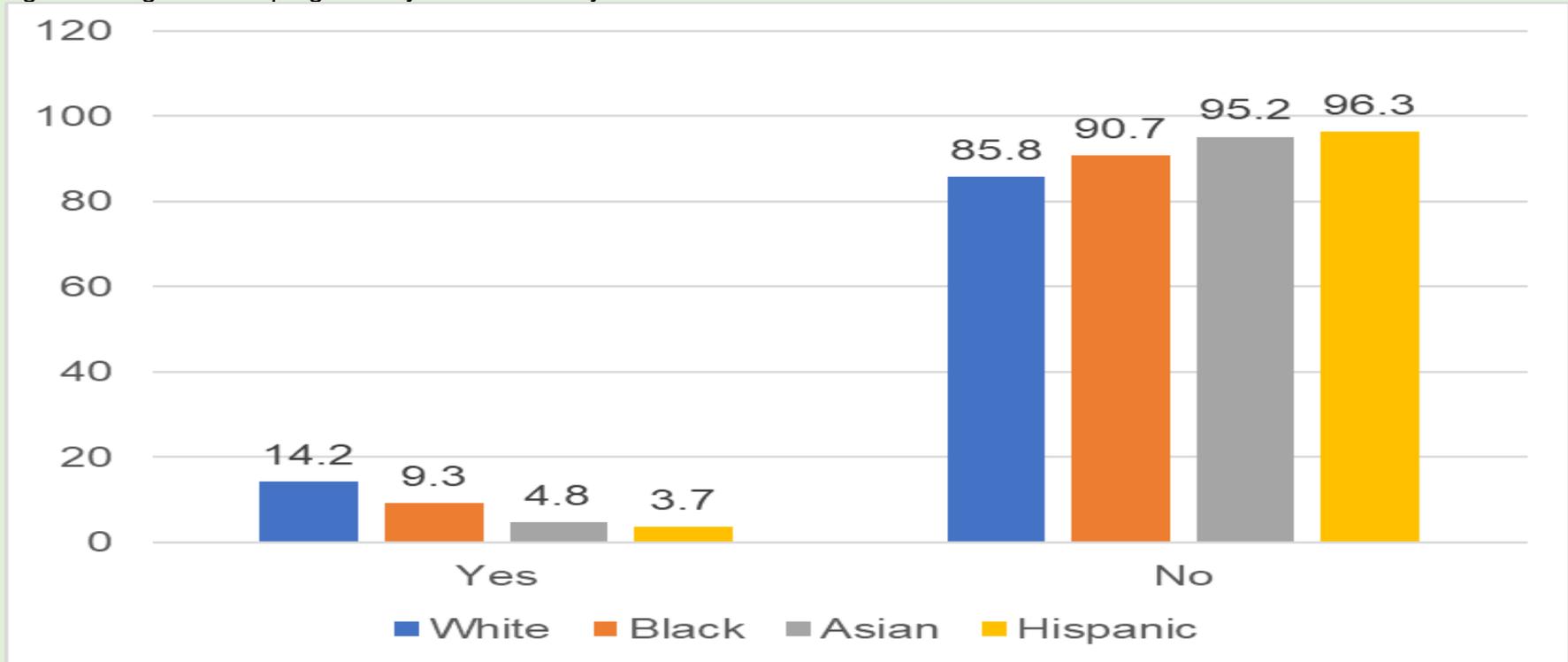


Fig 77. E-cigarette/Vaping Use by Race/ethnicity



The results of e-cigarette/vaping use by PCSA areas are in Table 32. Silver Spring PCSA area had the highest % use (13.5%), while Germantown/Gaithersburg/Poolesville PCSA area had the lowest (6.3%).

Table 32. E-cigarette/Vaping Use by PCSA Areas

E-cigarette/Vaping Use	PCSA Areas			
	Germantown/Gaithersburg/ Poolesville	Olney/Damascus	Rockville/Washington	Silver Spring/ Takoma Park
Yes	6.3 (0-12.77)	11.3 (0.62-21.91)	9.9 (2.08-17.74)	13.5 (1.09-25.81)
No	93.7 (87.23-100)	88.7 (78.09-99.38)	90.1 (82.26-97.92)	86.5 (74.19-98.91)

CONCLUSION

Overall, mental health (18.3%) is the most important health problem and availability/access to insurance (12.8%) is the most important social/environmental factor. Poor eating habits (17.4%) is the most important risky behavior and low crime/safe neighborhoods (20.9%) is the most important factor making up a healthy community. Cost (33.3%) was the most important reason not getting healthcare, 9.6% respondents were without health insurance. 76.4% residents visited healthcare providers last year, 75.9% had a PCP. 23.5% respondents reported not participating in any physical activity, 61.6% respondents reported at least one drink alcoholic beverage in the past 30 days. 7.6% respondents reported never having blood cholesterol checked, 10.4% respondents had last dental visit 5 or more years ago. 2.6% respondents reported that they smoke everyday, 10.2% respondents reported e-cigarette/vaping use. Depressive disorder (25.7%) was the most common health condition.

For topics related to COVID-19 impacts, 52.3% of respondents indicated a family member or friend outside their household has been diagnosed with COVID-19. 15.7% reported that they have never received the flu vaccine, finances (14%) were the area with the highest impact. Healthcare assistance (8.4%) was the area needed most, 0.6% indicated not interested in COVID-19 testing.

Montgomery County ranks on top for most health outcomes and health factors among jurisdictions in Maryland. Despite the availabilities of County-level data from some federal/state level survey (i.e., BRFSS), the unavailability of sub-County level data makes the understanding of great variations within the County infeasible. This further impedes the planning efforts and resource allocation for population subgroups and communities. The findings from this health survey can help inform public health officials and policy makers to target specific population and communities at high risks to address health equity, and to improve population health. It is essential to monitor the trend of these data over time, as part of ongoing public health surveillance, through conducting and collecting health survey data on the regular basis.

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APPENDIX: Health Survey in English and Spanish

2022 Montgomery County Community Health Needs Survey

Montgomery County Department of Health and Human Services is conducting a Community Health Needs Survey for **adults aged 18 and older living in Montgomery County**. By taking a few minutes to complete these questions, you will help us identify the most important health needs in your community so that we may develop strategies to meet these needs. Your responses are anonymous. Thank you for your input.

Section 1: Health and Health Related Priorities

Responses to this set of questions help us create programs and services that best fit the diversity of the community.

1.1 What are the three most important health problems that affect the health of you or your community? *Please check up to **three**.*

- Arthritis
- Substance misuse
- Cancers
- COVID-19
- Dental problems
- Diabetes
- Firearm-related injuries
- Heart/Respiratory disease and stroke
- HIV/AIDS
- Infant death
- Infectious diseases (e.g., TB, hepatitis)
- Mental health problems
- Motor vehicle crash injuries
- Overweight/obesity
- Rape/sexual assault
- Sexually transmitted diseases
- Suicide
- Teenage pregnancy

1.2 What are the most important social/environmental problems that affect the health of you or your community? *Check all that apply.*

- Availability/access to doctor's office
- Availability/access to insurance
- Lack of access to parks and open spaces
- Chemical/environmental health hazard
- Domestic violence
- Limited access to healthy foods
- School dropout/poor schools
- Lack of job opportunities
- Race/ethnicity discrimination
- Child abuse/neglect
- Lack of affordable childcare
- Housing/homelessness
- Energy assistance (utilities)
- Neighborhood safety/violence
- Poverty
- Transportation problems

1.3 What are the three most important risky behaviors that affect the health of you or your community? *Please check up to **three**.*

- Alcohol dependency
- Dropping out of school
- Drug abuse
- Lack of exercise
- Poor eating habits
- Not getting shots to prevent disease
- Texting/on the phone while driving
- Tobacco use/or electronic cigarette/vape use
- Not using seat belts and/or child safety seats
- Unsafe sex
- Other (Please specify) _____

1.4 What are the three most important factors that make up a healthy community? *Please check up to three.*

- Low crime/safe neighborhoods
- Good schools
- Access to health care

- Access to parks and recreation
- Affordable housing
- Good jobs and healthy economy
- Strong family life
- Healthy behaviors and lifestyles

Section 2: Healthcare Access

2.1 What are the three most important reasons that you or people in your community do not get health care? *Please check up to three.*

- Cost
- No insurance
- Lack of transportation
- Language barrier
- Wait too long
- No doctor nearby
- Do not trust doctors/hospitals/medicine
- Cultural/religious beliefs
- Immigration status

2.3 How long has it been since you last visited a doctor or other healthcare provider for a routine checkup?

- Within the past year
- Within the past 2-5 years
- 5 or more years ago

2.4 Do you have one person you think of as your personal doctor or healthcare provider?

- Yes
- No

2.2 How do you pay for health care (*Check all that apply*)?

- Pay cash (no insurance)
- Health insurance through employer
- Self-purchased Health insurance
- Medicaid/Medicare/Govt

Section 3: from COVID-19

We would like to know how you have been affected by the COVID-19 pandemic.

3.1 Which of the following apply to you? *Check all that apply.*

- I have been diagnosed with COVID-19
- A household member has been diagnosed with the COVID-19
- A family member or friend outside my household has been diagnosed with the COVID-19
- I don't know anyone personally who has been diagnosed with the COVID-19

3.4 As a result of COVID-19, have you needed in the past or do you now need assistance with any of the following? *Check all that apply.*

- Health care
- Financial assistance
- Energy assistance (utilities)
- Food assistance
- Wi-Fi/internet
- Housing/shelter
- Translation/interpretation services
- Childcare
- Rental/mortgage assistance
- None of the above

3.2 In past years, how often did you receive the flu vaccine?

- Never
- Once in the last 5 years
- 2-3 times in the last 5 years
- Every year

3.3 Please rate how much you (or your household) were affected across the following areas as a result of COVID-19:

	No	Mild	Moderate	Severe
Finances				
Food supply				
Job or wage loss				
Housing				
Physical health				
Mental health				
Childcare				
Travel plans or vacations				
Social relationships				
Death of family member or friends				
Outdoor recreational activities				

3.5 Which of the following activities apply to you? *Check all that apply.*

- I get tested for COVID-19 at regular intervals.
- I have not been tested for COVID-19.
- I would get tested for COVID-19 if I believe I have been exposed to someone with this disease.
- I would get tested for COVID-19 if I have symptoms.

- I am not interested in being tested under any of these circumstances.
 - Please list any reason why _____.
- I would stay home while experiencing any of the COVID-19 symptoms.

Section 4: Health Status and Health Related Behaviors

4.1 During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, strength training, golf, gardening, or walking for exercise?

- Yes – If so, please write where: _____
- No

4.2 During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

- ___ Days per week
- ___ Days in past 30 days
- No drinks in past 30 days

4.3 Blood cholesterol is a fatty substance found in the blood. About how long has it been since you last had your blood cholesterol checked?

- Never
- Within the past year
- Within the past 2-5 years
- 5 or more years ago

4.4 Has a doctor, nurse, or other health professional ever told you that you had any of the following health conditions (check all that apply):

- Heart attack, stroke
- Angina/coronary heart disease
- Asthma
- Cancer (Please specify) _____
- Chronic obstructive pulmonary disease, emphysema or chronic bronchitis

Section 5: Demographic Questions

5.1 Zip code where you live: _____

5.2 What is your current age?

Years

5.3 Are you ... ?

- Male
- Female

- Arthritis, rheumatoid arthritis, gout, lupus or fibromyalgia
- Depressive disorder
- Kidney disease
- Diabetes

4.5 How long has it been since you last visited a dentist or dental clinic for any reason?

- Within the past year
- Within the past 2-5 years
- 5 or more years ago
- Never

4.6 How often do you smoke?

- Never
- Every day
- Some days
- Within the past year
- Within the past 5-10 years

4.7 Have you ever used an e-cigarette or other electronic vaping product, even just one time, in your entire life, every day, some days, or not at all? Electronic cigarettes (e-cigarettes) and other electronic vaping products include electronic hookahs (e-hookahs), vape pens, e-cigars, and others. These products are battery-powered and usually contain nicotine and flavors such as fruit, mint, or candy.

- Yes
- No

Other (Please specify) _____

5.4 What is your race?

- African American/Black
- Asian/Pacific Islander
- American Indian or Alaska Native

- White/Caucasian
- More than one race
- Other (Please specify) _____

5.5 What is your ethnicity?

- Hispanic or Latino
- Not Hispanic; Not Latino

5.6 What is your annual household income?

- Less than \$20,000
- \$20,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- Over \$100,000

5.7 What is your marital status?

- Married
- Divorced
- Widowed
- Separated
- Never married

5.8 What language do you speak at home?

- English
- Spanish
- Chinese
- Korean
- Russian
- Vietnamese
- Arabic
- Amharic
- Other (Please specify) _____

5.9 What is your highest level of education?

Years of education _____

5.10 Which of the following best describe your employment status?

- Employed, working full-time
- Employed, working part-time
- Temporarily laid off due to COVID-19 shutdown
- Not employed
- Disable, not able to work
- Retired

Encuesta de necesidades de salud comunitaria del condado de Montgomery 2022

El Departamento de Salud y Servicios Humanos del Condado de Montgomery está realizando una encuesta de Necesidades de Salud Comunitaria para **adultos mayores de 18 años que viven en el condado de Montgomery**. Al tomarse unos minutos para completar estas preguntas, nos ayudará a identificar las necesidades de salud más importantes de su comunidad para desarrollar estrategias y satisfacer estas necesidades. Sus respuestas son anónimas. Gracias por su aporte.

Sección 1: Salud y prioridades relacionadas con la salud

Las respuestas a esta sección nos ayudan a crear programas y servicios que se adapten a la diversidad de la comunidad.

1.1 Cuáles son los tres problemas de salud más importantes que afectan su salud o la de su comunidad? *Marque hasta tres.*

<input type="checkbox"/> Artritis	<input type="checkbox"/> Muerte infantil
<input type="checkbox"/> Mal uso de sustancias	<input type="checkbox"/> Enfermedades infecciosas (p. Ej., TB, hepatitis)
<input type="checkbox"/> Cánceres	<input type="checkbox"/> Problemas de salud mental
<input type="checkbox"/> COVID-19	<input type="checkbox"/> Lesiones por accidentes automovilísticos
<input type="checkbox"/> Problemas dentales	<input type="checkbox"/> Sobrepeso / obesidad
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Violación / agresión sexual
<input type="checkbox"/> Lesiones por armas de fuego	<input type="checkbox"/> Enfermedades de transmisión sexual
<input type="checkbox"/> Enfermedades del corazón o respiratorias	<input type="checkbox"/> Suicidio
<input type="checkbox"/> VIH / SIDA	<input type="checkbox"/> Embarazo en adolescente

1.2 ¿Cuáles son los problemas sociales / ambientales más importantes que afectan su salud o la de su comunidad? *marque todo lo que corresponda.*

<input type="checkbox"/> Disponibilidad /acceso consultorios médicos	<input type="checkbox"/> Discriminación racial / étnica
<input type="checkbox"/> Disponibilidad / acceso al seguro de salud	<input type="checkbox"/> Abuso infantil / negligencia
<input type="checkbox"/> Falta de acceso a parques y espacios abiertos	<input type="checkbox"/> Falta de cuidado infantil económico
<input type="checkbox"/> Peligro de salud por químicos en el ambiente	<input type="checkbox"/> Problemas de vivienda / falta de vivienda
<input type="checkbox"/> Violencia doméstica	<input type="checkbox"/> Falta de asistencia de utilidades (luz, gas)
<input type="checkbox"/> Acceso limitado a alimentos saludables	<input type="checkbox"/> Inseguridad en el vecindario/violencia
<input type="checkbox"/> Abandono escolar / malas escuelas	<input type="checkbox"/> Pobreza
<input type="checkbox"/> Falta de oportunidades laborales	<input type="checkbox"/> Problemas de transportación

1.3 ¿Cuáles son los tres comportamientos riesgosos más importantes que afectan a su comunidad? *Por favor marque hasta tres.*

<input type="checkbox"/> Dependencia del alcohol	<input type="checkbox"/> Textear en el teléfono mientras maneja
<input type="checkbox"/> Abandono a la escuela por los jóvenes	<input type="checkbox"/> Uso de tabaco, cigarrillos electrónicos /vapor
<input type="checkbox"/> Abuso de drogas	

<input type="checkbox"/> Falta de ejercicio <input type="checkbox"/> Malos hábitos alimenticios <input type="checkbox"/> No recibir vacunas para prevenir enfermedades	<input type="checkbox"/> No usar cinturón de seguridad/sillas de seguridad para bebés en los autos <input type="checkbox"/> Sexo sin protección <input type="checkbox"/> Otro (especifique)_____
--	--

1.4 ¿Cuáles son los tres factores más importantes que conforman una comunidad saludable? *Por favor marque hasta tres.*

<input type="checkbox"/> Vecindario seguro, con baja criminalidad <input type="checkbox"/> Buenas escuelas <input type="checkbox"/> Acceso a servicios de salud <input type="checkbox"/> Acceso a parques y recreación <input type="checkbox"/> Parques y actividades de recreación	<input type="checkbox"/> Vivienda de costo económico <input type="checkbox"/> Buenos trabajos y economía saludable <input type="checkbox"/> Fortaleza en la vida familiar <input type="checkbox"/> Comportamientos y estilos de vida saludables
---	--

Sección 2: Acceso a la atención médica

2.1 ¿Cuáles son las tres razones más importantes por las que usted o las personas de su comunidad no reciben atención médica? *Por favor marque hasta tres.*

<input type="checkbox"/> Costo <input type="checkbox"/> Falta de seguro de salud <input type="checkbox"/> Falta de transporte <input type="checkbox"/> Barrera del lenguaje <input type="checkbox"/> Hay que esperar demasiado	<input type="checkbox"/> No hay médico cerca <input type="checkbox"/> No confiar en médicos/hospitales/medicinas <input type="checkbox"/> Creencias culturales / religiosas <input type="checkbox"/> Estado de inmigración
--	---

2.2 ¿Cómo paga la atención médica? *(Marque todo lo que corresponda)*

<input type="checkbox"/> Paga en efectivo (sin seguro) <input type="checkbox"/> Seguro de salud a través de un empleador actual o anterior	<input type="checkbox"/> Seguro de salud comprado directamente de una compañía de seguros <input type="checkbox"/> Medicaid/Medicare/ ayuda de Gobierno
---	--

2.3 ¿Cuánto tiempo ha pasado desde la última vez que visitó a un médico u otro proveedor de atención médica para un chequeo de rutina?

- En el último año
- En los últimos 2-5 años
- Hace 5 o más años

2.4 ¿Tiene una persona que considere su médico personal o proveedor de atención médica?

- Sí
- No

Sección 3: o de COVID-19

Nos gustaría saber cómo ha sido afectado por la pandemia de COVID-19.

3.1 ¿Cuál de los siguientes se aplica a usted? *Marque todo lo que corresponda.*

<input type="checkbox"/> Me han diagnosticado con COVID-19 <input type="checkbox"/> Un miembro del hogar fue diagnosticado con COVID-19	<input type="checkbox"/> Un miembro de la familia fuera de mi hogar o un amigo fue diagnosticado con COVID-19 <input type="checkbox"/> No conozco a nadie personalmente que haya sido diagnosticado con el COVID-19
--	--

3.2 En años anteriores, ¿con qué frecuencia recibió la vacuna contra la gripe? (influenza)

<input type="checkbox"/> Nunca <input type="checkbox"/> Una vez en los últimos 5 años	<input type="checkbox"/> 2-3 veces en los últimos 5 años <input type="checkbox"/> Todos los años
--	---

3.3 Califique cuánto se vio afectado usted (o su hogar) en las siguientes áreas como resultado de COVID-19:

	Sin o	o Leve	o Moderado	o Severo
Finanzas				
Suministro de alimentos/Comida				
Perdida de trabajo/salario				
Vivienda				
Salud Física				
Salud Mental				
Cuidado de Niños				
Planes de viaje o vacaciones				
Relaciones Sociales				
Muerte de familiares o amigos				
Actividades recreativas al aire libre				

3.4 Como resultado de COVID-19, ¿ha necesitado en el pasado o ahora necesita ayuda con alguno de los siguientes? *Marque todo lo que corresponda.*

<input type="checkbox"/> Cuidado de la salud <input type="checkbox"/> Asistencia financiera <input type="checkbox"/> Asistencia de utilidades (servicios públicos) <input type="checkbox"/> Asistencia alimentaria/Comida <input type="checkbox"/> Wi-Fi / internet	<input type="checkbox"/> Vivienda / albergue <input type="checkbox"/> Servicios de traducción / interpretación <input type="checkbox"/> Cuidado de niños <input type="checkbox"/> Alquiler / ayuda con la hipoteca <input type="checkbox"/> Ninguno de los anteriores
---	---

3.5 ¿Cuál de las siguientes actividades se aplica a usted? *Marque todo lo que corresponda.*

<input type="checkbox"/> Me hacen la prueba de COVID-19 a intervalos regulares. <input type="checkbox"/> No me han hecho pruebas de COVID-19. <input type="checkbox"/> Me haría la prueba de COVID-19 si creo que he estado expuesto a alguien con esta enfermedad.	<input type="checkbox"/> Me haría una prueba de COVID-19 si tengo síntomas. <input type="checkbox"/> No estoy interesado en hacerme la prueba en ninguna de estas circunstancias. <input type="checkbox"/> Por favor explique por qué _____. <input type="checkbox"/> Me quedaría en casa si llegara a tener algún síntoma de COVID-19.
---	--

Sección 4: Estado de salud y comportamientos relacionados con la salud

4.1 ¿Durante el mes pasado, aparte de su trabajo habitual, participó en actividades físicas o ejercicios como correr, entrenar golf, jardinería o caminar para hacer ejercicio?

- Sí, si es así, escriba dónde: _____
- No

4.2 ¿Durante los últimos 30 días, ¿cuántos días por semana o por mes tomo al menos una bebida alcohólica como cerveza, vino, bebida de malta o licor?

- ___ Días por semana
- ___ Días en los últimos 30 días
- No bebidas en los últimos 30 días

4.3 El colesterol en la sangre es una sustancia grasa que se encuentra en la sangre. ¿Cuánto tiempo ha pasado desde la última vez que se revisó el colesterol en la sangre?

<input type="checkbox"/> Nunca	<input type="checkbox"/> En los últimos 5 años
<input type="checkbox"/> En el último año	<input type="checkbox"/> Hace 5 o más años
<input type="checkbox"/> En los últimos 2 años	

4.4 ¿Alguna vez un médico, una enfermera u otro profesional de la salud le dijo que tenía alguna de las siguientes condiciones de salud (consulte todo lo que corresponda)

<input type="checkbox"/> Ataque al Corazón	<input type="checkbox"/> Enfermedad pulmonar obstructiva crónica, enfisema o bronquitis crónica
<input type="checkbox"/> Angina / enfermedad coronaria o del corazón	<input type="checkbox"/> Artritis, artritis reumatoide, gota, lupus o fibromialgia
<input type="checkbox"/> Asma	<input type="checkbox"/> Trastorno depresivo
<input type="checkbox"/> Cáncer de piel	<input type="checkbox"/> Enfermedad renal (sin incluir cálculos renales, infección de la vejiga o incontinencia)
<input type="checkbox"/> Cáncer de mama	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Cáncer de próstata	
<input type="checkbox"/> Otros tipos de cáncer (especifique) _____	

4.5 ¿Hace cuánto que fue al dentista o clínica dental?

<input type="checkbox"/> Durante el año pasado	<input type="checkbox"/> Hace 5 o más años
<input type="checkbox"/> Entre los últimos 2 a 5 años	<input type="checkbox"/> Nunca

4.6 ¿Con que frecuencia fuma??

<input type="checkbox"/> Nunca	<input type="checkbox"/> Durante el año pasado
<input type="checkbox"/> Todos los días	<input type="checkbox"/> Entre los últimos 5 y 10 años
<input type="checkbox"/> Algunos días	

4.7 Alguna vez ha usado un cigarrillo electrónico u otro producto de vapeo electrónico, incluso solo una vez, en toda su vida? Los cigarrillos electrónicos y otros productos de vapor electrónico incluyen los ganchos, cachimbas y plumas electrónicas funcionan con baterías y contienen nicotina y sabores como frutas, menta o dulces.

- Si

No

Sección 5: Preguntas demográficas

<p>5.1 Código postal donde vive: _____</p> <p>5.2 ¿Cuál es su edad actual? <input type="text"/><input type="text"/> Años</p> <p>5.3 ¿Se identifica usted con el sexo ...? <input type="checkbox"/> Masculino <input type="checkbox"/> Femenino <input type="checkbox"/> Otro (especifique) _____</p> <p>5.4 ¿Cuál es su raza? <input type="checkbox"/> Afroamericano / Negro <input type="checkbox"/> Asiático o Isleño del Pacífico <input type="checkbox"/> Indio Americano o Nativo de Alaska <input type="checkbox"/> Blanco / Caucásico <input type="checkbox"/> Más de una raza <input type="checkbox"/> Otro (especifique) _____</p> <p>5.5 ¿Cuál es su origen étnico? <input type="checkbox"/> Hispano o latino <input type="checkbox"/> No hispano; no latino</p> <p>5.6 ¿Cuál es su ingreso familiar anual? <input type="checkbox"/> Menos de \$ 20,000 <input type="checkbox"/> \$ 20,000 a \$ 34,999 <input type="checkbox"/> \$ 35,000 a \$ 49,999 <input type="checkbox"/> \$ 50,000 a \$ 74,999 <input type="checkbox"/> \$ 75,000 a \$ 99,999 <input type="checkbox"/> Más de \$ 100,000</p>	<p>5.7 ¿Cuál es su estado civil? <input type="checkbox"/> Casado <input type="checkbox"/> Divorciado <input type="checkbox"/> Viudo <input type="checkbox"/> Separado <input type="checkbox"/> Nunca casado</p> <p>5.8 ¿Qué idioma habla en casa? <input type="checkbox"/> Inglés <input type="checkbox"/> Español <input type="checkbox"/> Chino <input type="checkbox"/> Coreano <input type="checkbox"/> Ruso <input type="checkbox"/> Vietnamita <input type="checkbox"/> Árabe <input type="checkbox"/> Américo <input type="checkbox"/> Otro (especifique) _____</p> <p>5.9 ¿Cuál es su nivel más alto de educación? Años de educación _____</p> <p>5.10 ¿Cuál de los siguientes describe mejor su situación laboral? <input type="checkbox"/> Empleado, trabajando tiempo completo <input type="checkbox"/> Empleado, trabajando tiempo parcial <input type="checkbox"/> Despido temporal debido a la pandemia de COVID-19 <input type="checkbox"/> No empleado, buscando trabajo <input type="checkbox"/> No empleado, no buscando trabajo <input type="checkbox"/> Deshabilitado, sin poder trabajar <input type="checkbox"/> Jubilado</p>
--	---